

ELOQUENT BODIES: DISABILITY AND SENSIBILITY  
IN THE NOVELS OF FRANCES BURNEY AND JANE AUSTEN

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## ABSTRACT

The Culture of Sensibility permeates both Burney's and Austen's novels. Burney and Austen both use anomalous bodies and minds as a vehicle to explore the performative requirements of the Culture of Sensibility. The performance of disability, including bodily manifestations of nervous disorders, melancholy, and hypochondria, allows sensibility to become visible on the body. This dissertation examines the similarities between Burney's and Austen's portrayals of disability in order to understand how Austen's texts engage and reflect Burney's influence. Despite the frequency with which disability is necessary for the production of Sensibility, the connection between disability and Sensibility remains unexplored. This dissertation investigates the connection between various performances of disability with the Culture of Sensibility and exposes the narrative reliance on the anomalous body in both Burney's and Austen's novels.

Through a combination of disability theory and performance theory, this dissertation examines the Culture of Sensibility's reliance on the non-normative body for the performance of sentimental behaviour. Disability theory allows for the examination of the anomalous body beyond that of a strictly medical definition. *Mansfield Park's* Fanny Price illustrates the difference between the medical and social construction of disability. Using only the medical model, Fanny's debility represents her poor health; however, the social construction of disability connects Fanny's debility to the fetishization of the anomalous body by the Culture of Sensibility. Disability features in Burney's and Austen's courtship narratives, as temporary physical and mental impairment provide opportunities for physical proofs of Sensibility, somatic communication of desire, and narrative resolution. Both Burney's and Austen's illness narratives of characters with permanent disabilities reveal concerns of the appropriation of the

invalid's favourable position within the Culture of Sensibility through an affected performance of disability. Male characters with temporary or permanent physical impairment suffer effeminization and exclusion from courtship narratives, whereas instances of female invalidism contribute to successful resolution of courtship narratives. I conclude that Burney's and Austen's reliance on the anomalous body to prove sensibility indicates that the late-eighteenth century sentimental novel normalizes the anomalous body.

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## **DEDICATION**

For Mom and Dad,  
and Miguel.

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## INTRODUCTION

In a letter to her sister Cassandra, Jane Austen describes Miss Fletcher, a new friend: “There are two Traits in her Character which are pleasing; namely, she admires Camilla, & takes no cream in her Tea” (9). Austen’s high regard for Frances Burney’s novels, as well as both authors’ popularity as late-eighteenth-century female writers, lead to inevitable comparisons of their novels. Austen read *Evelina*, *Cecilia*, and *Camilla* while writing her own *Juvenilia*, some of which forms the narrative basis for her published novels and contains various oblique and specific references to Burney’s novels. Austen reuses names and archetypes from Burney’s novels for characters in her own novels, such as the libertine Willoughby, who is found first in *Evelina* before appearing in Austen’s *Sense and Sensibility*. In the closing pages of *Cecilia*, “PRIDE and PREJUDICE” is writ large as the cause of all Cecilia and Delvile’s past trouble. Austen takes this phrase for the title of her second published novel, which features romantic leads who represent pride and prejudice respectively, as well as a meddling and opinionated Lady Catherine de Bourgh sitting in for the sanguineous Mrs. Delvile. Camilla Tyrold’s delirium is rewritten as Marianne Dashwood’s putrid fever, as both stem from conscious and practiced self-neglect, and both characters are criticized for their performative aspects.

The link between Burney’s and Austen’s work is long established in scholarship. Academic scholarship focuses on similarities and references to Burney in Austen’s novels, including comparisons of the representation and status of women, of men, of marriage plots, use of propriety, and the epistolary tradition.<sup>1</sup> Nagle reveals the hole in this scholarship: “what is

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<sup>1</sup> In the research undertaken for this dissertation, I found the most useful examples of comparisons between Burney and Austen as follows: Julia Epstein’s *The Iron Pen*, which provides more on Burney than Austen nevertheless offers glimpses of Burney’s influence on Austen. Audrey Bilger’s “Goblin Laughter: Violent Comedy and the Condition of Women in Frances Burney and Jane Austen” also provides an insight into how textual violence emphasizes

seldom noted is that both figures share a common influence that undergirds the fictional world of each writer, a once-discredited influence that comes from the heart of eighteenth-century popular culture's deepest rivers of excess: the culture of Sensibility" (88). Burney and Austen scholars have focused on the body and sensibility, but an area that has not been explored is how the eighteenth century saw both the interaction between disability and sensibility, and the function of the disabled body in literature. Margaret Doody suggests that Burney "offers not a reflection but an examination of her society in its structure, functions, and beliefs" (3), but I argue that Burney's examination of her society included the overlooked connection between sensibility and disability. Julia Epstein focuses her examination of the body in *The Iron Pen* on bodily and mental violence inflicted upon women. According to Epstein, the body is present in the sense that patriarchal forces act upon it and by doing so, the body "empowers the female voice in all Burney's writings" (55). Disability is treated as part of a larger metaphor of female imprisonment (147); however, Epstein's examination does not explore contemporary attitudes to disability. I draw on contemporary accounts of disability, such as David Shuttleton's work on smallpox and literature, in order to create a more complete overview of what disability signified

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the "perilous position of the woman writer" (328). Kathleen Anderson's "Frances Burney's *The Wanderer*: Actress as Virtuous Deceiver" compares the influence of the theatre and performance on Burney's and Austen's novels; Bilger's "Mocking the 'Lords of Creation': Comic Male Characters in Frances Burney, Maria Edgeworth and Jane Austen" discusses the development of the subversive female laughter towards men; Julie Shaffer's "Not Subordinate: Empowering Women in the Marriage-Plot – The Novels of Frances Burney, Maria Edgeworth, and Jane Austen" discusses the constraints of the courtship narrative. Susan Morgan's "Why There's No Sex in Jane Austen's Novels" offers an evolution of the depiction of female virginity and male aggression from Burney's *Evelina* to Austen's various heroines; Joyce Hemlow's "Fanny Burney and the Courtesy Books" outlines the conduct book literature that impacted both Burney's and Austen's writing, specifically Fordyce's (735) and Berquin's texts (750-751). Mary Poovey's *The Proper Lady and the Woman Writer* explores the issues facing all eighteenth-century women writers, including Burney and Austen; and Christopher Nagle discusses Burney and Austen's shared epistolary tradition in "The Epistolary Passions of Sympathy: Feeling Letters in *Persuasion* and Burney's *The Wanderer*."

in the eighteenth century. Paul Goring's work explores the body as capable of "perform[ing] an act of civilization" (24) through the staged production of sensibility. His work highlights the conscious performance of sensibility on the eighteenth-century stage and in books, but does not touch on the necessary performance of disability, such as fainting, fevers, or hypochondria, that makes sensibility visible. Juliet McMaster argues that in Burney's *Evelina* the silencing of the mind and body through illness in order to prevent the heroines from speaking is potentially dangerous (*Reading the Body* 160). In McMaster's view, Burney's silencing of her heroines stands as a warning that "to stifle expression, to deprive a woman of a proper vent for her nervous disorder, is to risk illness and insanity" (23). However, the function of mental illness as a disability in the text has been overlooked. Both Nora Nachumi and Barbara Darby provide context for Burney's and Austen's theatrical references. Darby's work focuses on Burney's use of dramatic works to challenge her society's conceptions of femininity (21), while Nachumi's work focuses on the difficulties faced by female playwrights in a male-dominated profession. Both Darby's and Nachumi's work is particularly helpful as both individually examine gender performativity in the theatre.

While Austen scholars have commented on the preponderance of illness and invalidism throughout her novels, none has examined how Austen constructs and uses disability. John Wiltshire's argument that ill people make ill ends while healthy people are rewarded is problematized by the number of "healthy" characters who perform illness in order to reach their happy endings ("Jane Austen" 134). Penny Gay explores Austen's ties to the theatre as reflected in the coded performances of Austen's characters and the importance of theatricality in courtship

(92). Pamela Steele points towards Austen's use of illness as a narrative prosthesis,<sup>2</sup> in that "ailments and accidents are not merely useful plot devices, but legitimate illustrations of Austen's themes and logical applications of her philosophy" (152). Her analysis, while divorced from courtship narratives, provides a useful base from which to examine how Austen used her society's conception of disability to flesh out her own morality. Just as the normative body is unstable in Austen's work, so too is the heterosexual body. Susan Korba's analysis of latent lesbianism in Austen's *Emma* challenges the assumption of the normative heterosexual body, indicating a lack of stability and the presence of a spectrum of sexual orientation. I posit that the lack of stable normative bodies is not limited to sexuality, but includes various disabilities which, complicated by the prevailing Culture of Sensibility,<sup>3</sup> are normalized. Both Burney's and Austen's novels rely on bouts of illness and the disabled body to advance the plot, yet this connection is unexplored. While there has been discussion of how Burney and Austen use the disabled body, absent from the discussion is how the reliance on the disabled body to convey sensibility affects the overall understanding of how disability functions within the text.

In Burney's and Austen's novels ill, overly sensible, and deformed bodies appear as either permanently or temporarily disabled. The first representation is the presence of disability through marked bodies and permanent invalids. Disability, an important concept in my dissertation, is a term I define as a permanent or temporary non-normative body that is the result

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<sup>2</sup> Narrative prosthesis is a term developed by Mitchell and Snyder to describe the furthering of a narrative plot through the use of bodies made remarkable by bodily difference. A further discussion of this term can be found on page 8.

<sup>3</sup> Taking a cue from Barker-Benfield's *The Culture of Sensibility: Sex and Society in Eighteenth-Century Britain*, I am content to indicate the difference between the medical concept of sensibility and the Culture of Sensibility, which developed out of this new nervous theory by capitalization. The term "sensibility" refers solely to the nervous system and its attendant illnesses, while the term "Culture of Sensibility" refers to the cultural phenomena in which sensibility became linked with morality and sentiment. Further discussion of the evolution of sensibility into the Culture of Sensibility can be found on pages 9-15.

of the social construction of bodily difference. For these bodies marked by smallpox, hypochondria, and gout, disability is a binary state and once marked, there is no return to ability. Burney's and Austen's novels rely on the predominantly negative representation of the wealthy, immoderate man suffering from gout, the overly-passionate woman cured with fever, and the overly-sensible, effeminized hypochondriac; however, these instances of disability are necessary in revealing how the social construction of disability and sensibility functions ambiguously within the text. These bodies are permanently marked, but the texts question the degree of a character's complicity in the stigmatizing of their particular illness, as many of Burney's and Austen's characters attempt to control how they are perceived by others through manipulation of their illness narratives. The second mode of representation is through the Culture of Sensibility, which relies heavily on disability in order to make the invisible sensibility visible on the body. When functioning as part of sensibility, disability does not carry the same negative connotations of hypochondria, smallpox, or gout, and provides a space for courtship or reformation. Essential to the resolution of a novel's marriage plot, temporary disability, such as a fever or mania, provides a permanent change in the narrative, such as marriage or moral reformation, without negatively stigmatizing the character, although the character is undoubtedly marked by a favourable change in status. Furthermore, the illness often communicates what cannot be spoken aloud without compromising propriety and rules of conduct. The movement from performing sensibility to disability reveals the ambiguous relationship between them as many characters are censured for performing illness and disability in order to appear to have great and profound sensibility.

This dissertation examines both forms of the representation of disability. In Burney's and Austen's novels disability is more than a marker of deformity, as it is necessary both for the

performance of sensibility and for narrative resolution. While both authors use disability in their novels, Austen does not simply replicate Burney's modes of representing disability; Austen's novels indicate a subtle evolution in representations of disability characterized by a greater suspicion of the Culture of Sensibility. Burney's and Austen's use of disability promotes the idea that the body exists on a continuum of ability, thereby challenging the assumptions about disability as a binary state within the late-eighteenth century novel.

Disability as a category to describe bodily difference did not exist in the eighteenth century. Primarily a legal term in the eighteenth century, disability signifies a "want of power to do any thing; weakness; impotence" and "want of proper qualifications for any purpose; legal impediment" ("Disability"). Instead, the word deformity describes those bodies that deviate from the accepted standards of ability and, especially, beauty. In Samuel Johnson's *Dictionary*, deformity means "ugliness; ill-favouredness; ridiculousness; the quality of something worthy to be laughed at; irregularity; inordinateness; dishonour; disgrace" ("Deformity"). This broad definition indicates both an expansive category of deformity and a mutability of the term. Dwight Christopher Gabbard points out that the "anomalous body" of the eighteenth century, specifically as it deviates from the accepted form of beauty, includes "hermaphrodites, giants, dwarfs, hunchbacks, Siamese twins, hirsute women, and women whose faces had been pockmarked by smallpox" (84-5); however, the surrounding culture decides what the anomalous body signifies, which indicates a basic understanding of social construction. Helen Deutsch identifies two competing paradigms during this transitional period of the eighteenth century: "In one model the body is a sign for God to write on, in the other the body is rendered significant by individual attempts to overcome it" ("Exemplary Aberration" 198-9). Both models are subject to how their immediate societies interpret and understand disability. The dominance of the latter

paradigm in the second half of the eighteenth century results in an emphasis on what Gabbard terms “scientific pathology” (84) to explain defects, deformities, and monstrosities. This “scientific pathology” enters into societal discourse through the proliferation of medical pamphlets, resulting in a societal agreement of what constitutes deformity and what that particular deformity signifies. The growing medical discourse, eagerly consumed eagerly by an increasingly voyeuristic public, problematized the non-normative body; however, contemporary attitudes towards bodily difference, such as those expressed by Johnson and Edmund Burke, indicate that the anomalous body was regarded as the product of social construction, not of medical definition or divine intervention. While the eighteenth century may not use the term disability in precisely the same way as the twenty-first century, the term can still be applied to describe the anomalous body’s “relation to the cultural environment” (Gabbard 85); therefore, as both Johnson and Burke suggest, it is social construction, and not the medical model, that defines bodily difference in the eighteenth century.

By reinforcing bodily difference, the gaze is critical to the social construction of deformity. In his discussion of deformity, Burke presents bodily difference as a deviation – neither positive nor negative – from the common, visible norm: “so if a man’s neck be considerably longer or shorter than usual, we say he is deformed in that part, because men are not commonly made in that manner” (102). Deformity, like beauty, demands our attention because of its striking deviation from an accepted, albeit rare, “complete, common form” (102). Deformity and beauty are at opposing ends of a spectrum, the middle of which contains a notional norm: “The beautiful strikes us as much by its novelty as the deformed itself” (102). Unlike beauty, deformity can only disgust a viewer due to “the want of usual proportions” (103), although both beauty and deformity produce recognisable bodily responses in the viewer.

Similarly, Johnson's definition of deformity as "ridiculousness" and "the quality of something worthy to be laughed at" points toward the necessity of the gaze and viewer reaction in constructing the deformity. Consensus of what constitutes deformity rests in the stare marking out the aberrant form for, as Johnson put it, its "ridiculousness." For example, the odd pockmark is not considered prejudicial to beauty, but *Camilla's* Eugenia's pockmarked face crosses the threshold into being materially disfiguring, according to Dubster, who stands in and speaks for his larger community. Dubster's negative reaction to Eugenia as an "ugly little body" and a "little lame thing" (Burney 77) constructs Eugenia's body as deformed. Foucault refers to this type of stigmatizing stare as a glance, which "strikes at one point, which is central and decisive" (*Birth of the Clinic* 149). Furthermore, if this glance "strikes in its violent rectitude, it is in order to shatter, to lift, to release appearance. It is not burdened with all the abuses of language. The glance is silent, like a finger pointing, denouncing" (150). Rosemarie Garland-Thomson states that "by intensely telescoping looking towards the physical signifier for disability, staring creates an awkward partnership that estranges and discomforts both the viewer and viewed" ("The Politics of Staring" 56-7). Deformity and disability, therefore, result from the social process of observation and comparison with a normative body; they are not absolute values.

The disabled body is never far from the sentimental novel, as the narratives frequently require the performance of disability for sensibility to be visibly present on the body, a relationship which David Mitchell and Sharon Snyder term "narrative prosthesis." According to Mitchell and Snyder disability has two functions in literature: "Disability pervades literary narrative as, first, a stock feature of characterization and, second, as an opportunistic metaphorical device" (47). In the sentimental novel, the abnormal body makes the normal body visible; however, the abnormal body renders that character exemplary. Stereotypically, this



exemplary difference is rendered as either pure virtue of mind or absolute malevolence of spirit. Mitchell and Snyder contend that the rationale behind these representations is a plot device: “If the nondysfunctional body proves too uninteresting to narrate, the disabled body becomes a paramount device of characterization” (64). Yet for all the use of disability as a representation of sensibility, there is rarely any questioning as to why disability lends itself to metaphor. It is only when a character with a disability challenges the pervasive representation that the reader’s attention is caught. In other words, disability is visible when a character subverts the established disability narrative. Similarly, when a clearly able-bodied character co-opts the disability narrative to prove sensibility, the conscious appropriation of the narrative results in mockery and condemnation from the narrator. Outside these particular instances, representations of disability generally elide notice and remain at the textual margins.

Eighteenth-century sentimental novels frequently rely on the language and culture of sensibility, which in turn rely on the representation of disability. These sentimental narratives contain what Lennard Davis refers to as “semiologically normative signs” of apparently abled, healthy bodies (“Constructing Normalcy” 11). Davis links the development of a bodily norm within the novel with the spread of democracy during the eighteenth century, specifically as it emerged in the American Revolution of 1776. According to Davis, the concept of democracy requires an idea of what constitutes a citizen, and out of this visualization “we see the development of the average citizen in the literary form, of the average character of the novel, a genre that is devoted to the depiction of daily life, the quotidian: the average citizen as hero rather than the epic hero as larger-than-life victor. Thus the novel is a form centrally concerned with the norm” (103). The problem with this depiction, as Davis points out, is that it is based on “the fiction of the equal or average citizen” (104). The definition of normal is so specific that, as

a result, “under normalcy, no one is or can be normal, just as no one is or can be equal. All have to work hard to make it seem that they conform, and so the person with disabilities is singled out as a dramatic case of not belonging” (105). Davis locates his theory at the same time as the culture of sensibility, when the normative body of the sentimental novel requires the presence of disability. Rather than a mark of “not belonging,” performance of disability is necessary for admittance into the culture of sensibility. Compounded with the social construction of deformity, the reliance of sensibility on the presence of disability indicates that the normative body of the novel is not stable.

At the beginning of the eighteenth century, sensibility had a strictly medical connotation. Janet Todd notes that sensibility first appears as a medical term describing “a quality of nerves turning easily to illness and described in contemporary medical treatises in terms of movements within the body” (7-8). In its simplest form, sensibility is a person’s susceptibility to stimuli, whether the stimulus is external or internal, physical or mental. Sensibility is first introduced in Thomas Willis’s *Anatomy of the Brain*, who envisions a nervous system in which nervous fibres receive the initial sensations and movements, and that information is transmitted to the brain through the nerves: “the acts of their faculties are principally and more immediately executed by the Fibres than the Nerves; for they, by drawing together the Muscle and other motive parts, cause the motion it self; but the Nerves only carry from the Head the instinct for the performing of that motion” (128). The ability of the brain to transmit and receive information through the animal spirits present within the nervous system was considered central to human response to stimuli. If these animal spirits are “too sharp” (130) as the result of an overabundance, “they rush upon the nervous System with tumult and impetuosity; from thence a great unquietness and continual throwing about of the Members are wont to be excited, to which sometimes madness

and fury succeed” (130). According to the theory of sensibility, an individual’s mental and physical states are linked through these vibrations in the nervous system.<sup>4</sup> A normal susceptibility to stimuli does not leave an individual overpowered, but an abnormal susceptibility is the cause of mental illness.

Throughout the eighteenth century, sensibility evolves into a highly desirable trait. Sensibility comes “to denote the faculty of feeling, the capacity for extremely refined emotion and a quickness to display compassion for suffering” (Todd 7). Facilitating this transition from sensibility to Sensibility is a fashionable eighteenth-century nerve doctor George Cheyne, whose *The English Malady* discusses the melancholy endemic to the English people in which he equates a fineness and receptiveness of nerves to mental genius. Cheyne writes

those who Stutter, Stammer, have a great Difficulty of Utterance, speak very Low, lose their Voice without catching Cold, grow Dumb, Deaf, or Blind, without an Accident or an Acute Distemper; are quick prompt, and passionate; are all of weak Nerves; have a great Degree of Sensibility; are quick Thinkers, feel Pleasure or Pain the most readily, and are of most lively Imagination. (104-5)

Weak nerves are further indicated by “a white, fair, blanch’d, wax or ashen-colour’d Complexion,” (102) yet it was this complexion, not the “ruddy, brown, or dark Hue” (102) championed by Cheyne as healthy, that was prized by eighteenth-century society. As G.S. Rousseau points out, sensibility signified “not merely the strength or flaccidity of the animal spirits or fiber within the nerve, but now those *in addition to* the texture of the dermis, tears of

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<sup>4</sup> There are two competing conceptualizations of nerve theory in the eighteenth century. Willis believes that the nervous system is made up of hollow tubes filled with animal spirits, while others (Locke, Cheyne) believe that the nervous system is more like a violin string. In both cases, vibrations (either due to a tumult of animal spirits or overly tight nerves) communicate between the muscles and brain.

the eye, hot flush of the cheek, and natural expressions of blushing, weeping, crying, swooning, in brief all the anatomic manifestations of emotion and feeling, sympathy and empathy” (232). Effectively, while Cheyne laments weak nerves as the cause of melancholy, he simultaneously compliments his weak-nerved readers for the innate genius and benevolent humanity that these weakened nerves facilitate. Weak nerves and subsequent heightened sensibility are not negative attributes; in fact, the force of the culture of Sensibility indicates that these weak, overly susceptible nerves are highly prized. The pale skin allows highly visible blushes and, alongside a well-timed faint, is a principle characteristic of the heroines in courtship novels. Despite Cheyne regarding pale skin and blushes as signs of weak nerves in need of improvement, the symptoms of heightened sensibility convey status within the Culture of Sensibility. Cheyne added to the signs of sensibility actions that could be consciously performed or counterfeited, such as a stammering, low voice, weeping, and bodily weakness. This performance of the signs and symptoms of sensibility rests on how the body and its functions interact with the environment. Performing sensibility required feigned disability, in that appearance needs to reflect how the body functions. David Turner envisages a distinction between the appearance and function in his description of deformity and disability: “While the stigma of deformity derives from the appearance of bodies, modern definitions of disability focus more on the functions of bodies and their relationship to their social and physical environment” (2). Cheyne’s description of the English malady contradicts this argument as both appearance and function determine a body’s status.

Sensibility, like gender, is a value constructed through repetition and subverted through mimesis. Judith Butler theorizes that gender is a “repeated stylization of the body, a set of repeated acts within a highly regulatory frame that congeal over time to produce the appearance

of substance, of a natural sort of being” (*Gender Trouble* 45). This is never made more clear than when a young girl is exhorted to “act like a lady” by her mother, a phrase which hits upon the necessary bodily regulation and practice in order to represent an apparently natural state. After enough practice, gender “acquires an act-like status in the present, it conceals or dissimulates the conventions of which it is a repetition” (*Bodies That Matter* 12). But this practiced act of gender cannot escape its essentially performative basis. To “assume the feminine role deliberately” (124), as Luce Irigaray argues, requires a simultaneous understanding that there is nothing innate about gender. This awareness reveals how the construction of gender relies on a performance. For example, all that is considered “ladylike,” such as sitting with legs together and uncrossed, not drinking a pint of beer, all must be first performed consciously in order for gender to be visible. Irigaray posits that this conscious performance, or mimicry, of the feminine role is the first phase of challenging prevailing psychoanalytic and philosophical readings of what being female means: “To play with mimesis is thus, for a woman, to try to recover the place of her exploitation by discourse, without allowing herself to be simply reduced to it” (124). By consciously performing the recognized acts of a gendered body, the very notion of innate femininity or masculinity is subverted. By extension, wearing make-up no longer proves innate femininity, but rather displays the accepted performance of a particular gender.

As with gender, the production of sensibility hinges on a visual performance of specific coded behaviours that are inevitably subverted through mimesis, in that the performative requirement is visible when the theatricality of the performance is obvious to the audience. Although Willis conceived sensibility initially as an internal process of the nervous system, the visibility of sensibility and subsequent proof for membership within the Culture of Sensibility required a bodily performance. Weeping, fainting, swooning, and tremors all signify a body full

of sensibility. While these were all assumed to be innate and natural reactions to particular stimuli, these reactions all involve a bodily performance. Once these performances of weeping and swooning were associated with the Culture of Sensibility, they became inextricably linked to the social construction of Sensibility. As is evident from both eighteenth-century novelists and moralists, sensibility could be feigned by affecting a visible bodily performance and distinguishing between affected and unaffected Sensibility is only possible when the performance exposes its theatrical underpinnings to the audience. While this conscious production of sensibility proves one's status as being full of sensibility, it has the unintended result of drawing attention to the essentially performative nature of sensibility. The ability to distinguish between real and affected sensibility is a central concern of both Burney's and Austen's texts, as characters are often accused of acting or performing a part when they display sensibility. Furthermore, both Burney's and Austen's novels expose the theatrical requirements of performances of Sensibility, even if the character's performance is deemed natural and innate by the immediate audience within the novel. While a character's intention may not be to reveal the performative requirement of sensibility, the effect of mimesis is a subversion of the entire concept of innate sensibility. As a result, whether that character is revealed within the narrative to be affecting sensibility or not, the performative basis is exposed.

By the end of the eighteenth century, suspicions arose regarding counterfeit sensibility. In questioning the intentionality of bodily actions, the debate focused on whether or not bodily and mental reactions to stimuli can be feigned; however, beneath this debate is the reality that producing the bodily appearance of sensibility requires a performance of disability. In terms of the Culture of Sensibility, those who do not have an innate sensible and visible reaction to a scene, a poem, or a performance can perform as though they do. In other words, performing

sensibility provides membership within the Culture of Sensibility; however, the difficulty felt by eighteenth-century moralists was in how to tell the difference between affected and real sensibility. This becomes a larger problem when society requires the performance of sensibility that conceals the theatrical requirements in order to claim a place within the norm. Hannah More's poem "Sensibility" gives this eighteenth-century anxiety particular focus by describing the difference between expressing sentimental thoughts and displaying sentimental behaviour:

As words are but th' external marks, to tell  
The fair ideas in the mind that dwell;  
And only are of thing the outward sign,  
And not the things themselves, they but define;  
So exclamations, tender tones, fond tears,  
And all the graceful drapery Pity wears;  
These are not Pity's self, they but express  
Her inward sufferings by their pictur'd dress;  
And these fair marks, reluctant I relate,  
These lovely symbols may be counterfeit. (283-284)

The markers of sensibility – crying, weakness, and delicacy – echo Cheyne's list of the physical symptoms of the English malady. These attributes of sensibility require a physical performance of disability, but can be easily feigned, thereby drawing attention to Sensibility's artificial roots, and that the entire production of sensibility requires a performance of disability means the ideal bodily representation of sensibility rests on the abnormal body.

Sensibility also raises moral concerns in the late eighteenth century. The fetishization of feminine weakness and delicacy allows for a dangerous degree of sexual availability. Todd

argues that “women were thought to express emotions with their bodies more sincerely and spontaneously than men; hence their propensity to crying, blushing and fainting. At the same time, such a susceptible organism could easily become erratic and deranged” (19). The potential for disruption is high, however, as fainting allows the body to communicate what propriety forbids women to say. As Christiane Zschrunt points out while discussing Richardson, Pamela’s “frequent fainting fits” (49) serve to protect her virtue: “Taking place in situations of sexual harassment or even threat of rape, fainting averts the dawning of Pamela’s consciousness and keeps her in complete ignorance about sexual matters, even in an atmosphere heavily charged with desire and sex” (49). When maintaining virtue and propriety is not a priority, madness replaces fainting as the primary mode of bodily communication. *The Wanderer*’s erratic and mad Elinor pursues Harleigh, in complete disregard for her own safety and feminine propriety. In each case, the potential for social and moral disruption rests with a woman’s heightened sensibility. Fainting allows for disruption to be circumvented, propriety left intact, and a message still communicated, provided the observer understands the signs. At the same time, this particular type of sensibility relies on the presence of disability. Here again, sensibility cannot function without disability. Perpetual bodily weakness, tremors, and fainting communicate a body’s membership in the Culture of Sensibility. Without such performances, sensibility remains invisible. Pamela’s faints convey her virtue more succinctly than any long speech, however impassioned. The feminine body is most eloquent when she is incapable of articulation.

Who, then, speaks for the disabled body in the eighteenth-century novel? Disability, the result of the social construction of bodily difference, features in each of Burney’s and Austen’s novels, and not solely at the periphery of the text as objects of pity with which sentimental heroines can prove their heightened sensibility. Heroes and heroines in Burney’s and Austen’s



novels perform signs and symptoms which require the presence of disability and can only be understood within the context of the Culture of Sensibility. The non-normative body allows Burney and Austen to develop the narrative, as a chance cold or fever serves frequently as the impetus for events, but has the unintended effect of exposing an essential reliance on disability for the performance of sensibility. In both Burney's and Austen's novels, the body is full of nuance and resists simple categorization; there is no simple equation of physical disability indicating either purity or malevolence of spirit. Instead, the disabled body must speak for itself. The raw communicative power of the feverish heroine to explain her frustrated romantic desires supersedes any soliloquy, especially as much of what is revealed through the body's performance cannot be spoken aloud without risking feminine propriety. Once this performance of disability is exposed, however, the whole artifice of Sensibility as non-performative cannot long endure, resulting in a body that subverts the notion of Sensibility as an innate, non-performative attribute. In turn, this subversion reveals the late-eighteenth century anxieties surrounding the nature of Sensibility and its reliance on disability. The overt and subtle performances of Sensibility in Burney's and Austen's novels points to their awareness of and resistance to the performative requirements of the Culture of Sensibility.

This dissertation explores the various uses of disability in the works of Burney and Austen. Chapter One further develops the intersection between the performance of disability and the visibility of sensibility. Both Burney's and Austen's texts provide examples of the appropriation of theatrical language to describe the body's performance of disability in order to prove membership in the Culture of Sensibility. Burney's texts employ theatrical language to highlight the artifice of London society and, in the case of *The Wanderer*, to unequivocally connect theatrical performance to performances of Sensibility. Austen's texts grant motivations

to heroines who appropriate theatrical language to help in their performances of disability. Unhappy marriages and frustrated affairs find physical expression through a character's body. In Chapter Two, I explore the prevalence of social construction of disability, as found in the marked bodies of the permanent invalids. Both Burney's and Austen's texts contain examples of characters who are stigmatized as disabled by their communities, as well as those who actively seek the mantle of ill-health in order to claim status within the Culture of Sensibility. Both Burney and Austen are aware of the performative power of permanent illness and the attendant risks of expulsion from the Culture of Sensibility for not reacting properly to the performance of permanent illness and disability, be it legitimate or feigned. Chapter Three concerns the illness narratives of characters which move from illness to health throughout the course of a narrative. While these characters experience a change in status, they do not suffer the same permanent stigmatization as the permanent invalids discussed in the previous chapter. Burney's temporary invalids remain in control of their narratives, but Austen denies a voice to her feverish sufferers, leaving the power of framing the illness narrative in the hands of other characters. The effect of this distance is that the illness narrative reveals more about the character and less about the invalid. Finally, Chapter Four discusses mental illness and descriptions of madness. The social construction of madness and mental illness is closely connected to the Culture of Sensibility and courtship narratives. Temporary mental impairment performs the narrative function of allowing heroines to reveal their desires without compromising their propriety. While sentimental fiction requires this necessary subterfuge, both Burney's and Austen's texts provide criticism of the constraining gender performances that conflate female sensibility with mental impairment. Burney's Cecilia and Camilla and Austen's Marianne each experience a temporary speechlessness associated with the stifling demands of gender performance. By exploring all the

various characterization of disability is it possible to understand that the body in Burney's and Austen's texts is not stable, as it struggles to reveal its reliance on social construction and performance.

## CHAPTER ONE

### **“Every look *speaks!*”: Sensibility, Theatricality, and the Performance of Disability**

In both Burney's and Austen's novels a character's convincing portrayal of sensibility can result in success in the marriage market; likewise, failure to convincingly portray sensibility results in frustration and thwarted goals. The appearance of sensibility through the performance of disability and illness appears in both Burney's and Austen's novels as the effective shorthand for proving adherence to the Culture of Sensibility and indicates a character's readiness for courtship. Because there is no clear delineation between temporary illness and permanent disability through invalidism, there is a range of symptoms that must be interpreted and understood by an observer. But these daily performances, like their professional Drury Lane counterparts, require an audience conversant in the signs and signals of Sensibility. As Mullan states “there is no social space for sensibility. Illness is its appropriate metaphor” (240). The goal of the performance of disability is not a theatrical embodiment of sensibility, but rather the concealment of theatrical origins; therefore, both the performer and the observer enter into a non-verbal agreement to accept these stylized repetitions of bodily debility and nervous weakness as natural and innate representations of sensibility. Failure to perform the appropriate signs of illness, and to conceal the performance from the observer, leaves the character unable to claim sensibility. Likewise, if the observer fails to correctly interpret the performance, his or her membership in the Culture of Sensibility becomes suspect.

The successful performance of Sensibility requires a performative bodily communication involving disability and simultaneous dissembling of theatricality; however, the effect of these

requirements is mimesis,<sup>5</sup> which in turn destabilizes the narrated body by exposing the tension between accepted and unaccepted performances of Sensibility. As such, it is necessary to examine instances of theatricality in Burney's and Austen's texts in order to understand how each author resolves this dissonance. By examining a character's performance of sensibility dismissed by the respective texts as affected, the causes of a performance's failure lie universally in a character's inability to dissemble theatricality. The successful performances, in which the characters dissemble with greater skill, are still hampered by a narrative tension that cannot reconcile the disparity in judgment between two kinds of essentially performative and affected acts. This lack of reconciliation destabilizes the narrative body, shaking it loose from any ideology of the naturalness of sensibility. Theatrical events, such as Evelina's trip to the opera or *Mansfield Park's* family theatricals, serve to heighten a character's ability to discern convincing performances from poorly affected acts and highlight the daily theatricality inherent to performances of Sensibility, which is a necessary skill for successful navigation of both courtship and the surrounding Culture of Sensibility. Failure to reproduce adequately a convincing portrayal of sensibility as either an audience member or actor in a family theatrical leaves the character open to suspicion from his or her own immediate audience. The onus is on the character's body to display sensibility through the performance of disability. Both Burney and Austen use the performance of disability to make sensibility visible on the body, which has the effect of normalizing disability as a part of the larger Culture of Sensibility. But where Burney relies on archetypes of invalidism and disability to expose flawed performances, Austen moves beyond ridicule and explores her characters' motivation for performing disability to claim

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<sup>5</sup> Mimesis, for the purposes of this dissertation, is the subversion of the notion of innate Sensibility through the conscious performance of behaviours associated with the Culture of Sensibility for the purposes of membership.

sensibility. By including explicit references to theatrical language and performances in their novels, Burney and Austen reiterate the reliance of sensibility on the body's performance of disability. While Burney's texts gloss over the affected performances of heroines such as Camilla and Juliet, Austen's texts retain the narrative tension, which serves to raise further suspicions regarding the authenticity of Sensibility; however, the effect of this destabilization in both Burney's and Austen's texts is the heightened visibility of the affected theatricality necessary for a successful performance of Sensibility.

Burney and Austen use the fictive body as a site of cultural inscription and as a narrative device, but their reliance on theatricality, especially in the production of disability, reveals the essential performativity to the Culture of Sensibility. The effect of this reliance is to destabilize the body as a coherent cipher of eighteenth-century values. As such, the fictive body reflects changing eighteenth-century attitudes towards the body, both in term of disability and performance. Burney and Austen engage with the collective dissembling necessary to maintain the appearance of self; however, neither author is completely comfortable with this dissembling, as the narrative tension in their respective texts indicates. Austen, significantly more than Burney, casts a critical eye on all her characters and does not resolve narrative tension, and is especially impatient with unconvincing portrayals of sensibility that rely heavily on affected performances of disability.

The eighteenth-century concept of sensibility requires certain behaviours, such as blushing and fainting, to appear natural and unpractised. Conduct book writers, however, were suspicious of these performative aspects of sensibility and the ease with which such traits could be feigned. Mr. Gosport remarks to Cecilia that in London one may observe character types for whom "the trick grows into habit, and the habit is a second nature" (Burney, *Cecilia* 281).

Learned behaviour, then, appears as a performance that passes for nature. Burke echoes this concern for affectation and performativity as he argues that imperfections are necessary for beauty to be seen, and that women affect imperfections in order to be seen as beautiful:

This quality [beauty], where it is highest in the female sex, almost always carries with it an idea of weakness and imperfection. Women are very sensible of this; for which reason, they learn to lisp, to totter in their walk, to counterfeit weakness, and even sickness. In all this, they are guided by nature. Beauty in distress is much the most affecting beauty. (109)

This appearance of weakness, or delicacy, “is almost essential” to beauty: “The beauty of women is considerable owing to their weakness, or delicacy” (Burke 116). Burke cautions, however, against “weakness betraying very bad health,” as such a real loss of health results in a loss of beauty: “the bright colour, the *lumen purpureum juventæ* is gone; and the fine variation is lost in wrinkles, sudden breaks, and right lines” (116). The affectation of sensibility requires a performance of disability that balances between appearance of weakness and real illness in order for a woman to be considered beautiful. Burke’s definition of female beauty necessitates the performance of mild illness and simultaneously excludes serious illness and deformity; however, there is no clear boundary between illness, deformity, and disability.

While the extremes of ability and disability are obvious, the murky middle inhabited by illness is less so. The line between sensibility and disability is ambiguous, as without disability, sensibility is not visible. Performances move quickly and easily from sensibility to disability by virtue of bodily involvement, thereby disabusing the texts of any claim to a normative body.

Goring points out that

certainly illness and signs of physical weakness are essential to the vocabulary of

sentimentalism, but what is typically understated or ignored is the manner in which illness and weakness are mediated through conventions and frameworks which have as much in common with the stage as with the sickbed. (144)

The weak, reclining posture of the pale sentimental figure communicates sensibility as articulately as speech, provided there is an audience present to interpret these signs accurately. For example, Camilla's feverish delirium showcases her sensibility without recourse to speech. Unable to communicate her emotional distress at being separated from her family and her aborted courtship of Edgar, Camilla relies on her body to communicate her sensibility through illness: "She was full of fever, faint, pallid, weak, and shaken by nervous tremors" (Burney, *Camilla* 866). Camilla's body proves the authenticity of her sensibility, or rather, that Camilla's audience at the inn reads her body as performing authentic sensibility, thereby rendering her sensibility articulate and intelligible. Mrs. Tyrold chastises Camilla for the indulgent performance of illness, "this impetuous sensibility" (882), that has nearly killed her; however, Mrs. Tyrold does not question the veracity of Camilla's sensibility. Furthermore, no textual space is given to a meditation on the performative requirements of the Culture of Sensibility. As Hodgson-Anderson points out,

though redemptive, Camilla's performance is not condoned by her spectators or Camilla herself. She is criticized for voluntarily creating her own illness; while the sight of her suffering and her more active role in engineering this spectacle are depicted as the only way to reunite the family, the staged, wilful nature of her suffering remains unacceptable. (642)

Camilla's inability to conceal her performance leaves her open to criticism from her mother, but her claims to the Culture of Sensibility, as well as the requirements of the Culture itself, remain



unchallenged by the text. Furthermore, Camilla's staged illness allows for the sentimental narrative's resolution.

Surveillance further complicates the simulated unaffectedness of a performance, as the presence of an observer is essential for successful bodily communication. A performance of sensibility requires an audience that can decipher the signs of what a particular behaviour of comment signifies in order for performance of sensibility to be both visible and accepted. Unsurprisingly, this requires the performer to maintain control over bodily actions. This was especially problematic for women, as their modest characters were assumed to be visible through their modest bodily performances of blushing; therefore, a woman's moral character could be read on her face. As Nora Nachumi states

the theory of an unmediated connection between a lady's external attributes and her internal self thus made her an object of surveillance. This assumption, however, was one that constantly threatened to unravel. After all, if a ladylike behaviour was natural to women, why would they require instructions about how to behave? Consequently, much eighteenth-century conduct material reveals an anxiety about women who can act and appear other than themselves. (6-7).

Blushing is an ambiguous performance that simultaneously reveals and conceals sexual knowledge to observers. Conduct book writers like John Fordyce were particularly concerned with differentiating between affected and unaffected blushes. Fordyce equates unaffected blushing with innocence and claims that "it is the precious colouring of virtue" and signifies a young woman's innocence because it causes "them to shrink from whatever might injure it" (69-70). The danger is that immodest women can "affect" (70) blushing in order to appear virtuous and virginal, although "their minds are already debauched" (70). It is up to the audience to

discern what these dangerous blushes reveal, or conceal, about feminine desires. Burney dramatizes this point in *Cecilia* as Lady Honoria comments on the performativity of blushing: “Now Euphrasia can blush from morning to night. I can’t think how she contrives it. Miss Beverley, too, plays at it vastly well; she’s red and white, and white and red half a dozen in a minute” (491). The danger for Cecilia is that her desires for Delvile risk exposure through her inability to dissimulate and conceal her blushes, but as Lady Honoria points out regarding Euphrasia, such blushes can also be contrived. Likewise, Austen’s blushing female characters also explore the disruptive potential of inadequately concealed behaviour. As Heydt-Stevenson contends, “all of Austen’s works show rules of female behaviour take form in the body and, in giving them a mass, make palpable what is often invisible” (207). For example, Fanny Price blushes at Mary Crawford’s suggestion that her brother William does not write letters in “the true manly style” (*Mansfield Park* 70). While this blush signifies Fanny’s possible embarrassment of her brother’s long letters, it simultaneously demonstrates her ignorance of how men write letters. Fanny’s lack of experience reading letters from men other than her brother and subsequent blush make her modesty visible on her body; however, Mary Crawford’s knowledge and lack of blushing demonstrate how far she deviates from accepted female conduct. Her unblushing mention of “rears and vices” (71), which follows this discussion of letters, indicates a potentially disruptive level of sexual knowledge. Eighteenth-century female novelists demonstrate a keen awareness of the difference between performance and reality, allowing them to dramatize “the fact that acting like a lady means acting a role” within an orchestrated performance of gender and sensibility (Nachumi 66). The trick is that these practiced performances must appear unrehearsed and natural, or risk their audiences seeing through the façade and condemning their affectation.

Sensibility's performative requirement takes a theatrical turn partially because Burney's and Austen's heroines are subject to nearly constant surveillance, either internally, such as *Mansfield Park*'s Fanny and *Sense and Sensibility*'s Elinor, or from nearby observers; however, this surveillance leads to inevitable self-awareness of the need to perform naturally. When she interrogates Juliet, Mrs. Howel demands to know "what part is this that you [Juliet] are acting?" (Burney, *The Wanderer* 804). While this statement serves the plot development by questioning Juliet's intentions of insinuating herself into the Granvilles' social circle, the purposeful use of the word "acting" in a novel filled with theatrical references reveals the core anxiety of a woman's ability to dissemble. Mrs. Howel's surveillance of Juliet and concern that Juliet is acting a part echo the essential concern of eighteenth-century conduct book writers. Both Burney and Austen recognise the necessity of performativity to the successful production of both femininity and sensibility, which in turn subverts the myth of innate or natural, unpractised sensibility championed by conduct book writers. Burney makes the reliance on just such a performance explicit in *Cecilia*. Forced to appear willing to detach herself from Delvile, Cecilia must feign a degree of disinterest for Mrs. Delvile: "Cecilia had now acted her part, and acted it to her own satisfaction; but the curtain dropt when Mrs. Delvile left the house, nature resumed her rights, and the sorrow of her heart was no longer disguised or repressed" (652). Both Cecilia and Mrs. Delvile are complicit in the performance, which is necessary for both women to keep their reputations intact. The purposeful theatricality of the passage underlines the degree to which the characters were both simultaneously aware of the dissembling and of its necessity in order to maintain the integrity of the performance. This behaviour is mimesis, a mimicry of expected behaviour, which in turn subverts the authenticity of the performance, as the characters have consciously assumed their roles to the point at which the role becomes their identity.

The mimetic performance of sensibility closely resembles the production of gender. As Simone de Beauvoir argues, “one is not born, but rather becomes, a woman” (267). Just as “civilization as a whole” (267) creates the notion of the feminine, social construction is also responsible for the production of sensibility. Put simply by Mullan, “feminine sensibility is a construction” (224). Consequently, throughout the eighteenth century, sensibility comes to signify more than a nervous response to stimuli. As with the female body, in which “her body is something more than herself” (29), eighteenth-century society imbues the sensible body with meaning beyond its original medical description. When Burney’s and Austen’s characters consciously perform the bodily mannerisms associated with sensibility, they subvert the notion of sensibility as a natural or authentic state. These performances, intended to prove authenticity, inevitably subvert and make the artifice of sensibility visible. In turn, this subversion disturbs the meaning eighteenth-century society imbues in the female body. In the novels of Burney and Austen, the notion of sensibility as innate is constantly on the verge of collapse. It is only through collusion with an audience that the artifice remains intact, although the performativity is nakedly apparent. Sensibility, as other performances, works well within the novel form because, as Davis points out, “the novel is a form which depends on mimesis – the imitation of reality through realist techniques” (*Resisting Novels* 25). Like ideology for which Davis argues, sensibility also “attempts to destroy the veil of its artifice and to appear as natural as common sense” (25). Because of the necessity of performance in the production of sensibility, authentic naturalness of sensibility eludes even its most ardent adherents.

Similar to the production of gender, which requires recognized masculine or feminine behaviours to make gender visible, sensibility requires the performance of disability to render the body eloquent. When the performance of disability is clearly affected, the façade of sensibility

crumbles because the artifice is visible, the effect of which metaphorically disables the performer. For both Burney and Austen, disability is necessary for the performance of sensibility; however, when disability is affected for self-conscious and selfish motivations, both Burney's and Austen's texts hold this affectation up for ridicule. This disapproval centres on affectation of disability, rather than on disability itself, thereby indicating a tacit agreement on the necessity of disability for the appearance of Sensibility.

Recent scholarship on Burney's and Austen's work has begun to examine the conflicted representation of sensibility through the presence in their works of theatrical conventions and the Culture of Sensibility. Nachumi shows that Burney's knowledge of late-eighteenth century theatre and actors influences her representations of performance in her novels and plays. Burney's keen interest in theatre provides an additional context for the various theatre outings in her texts, as well as allows for an exploration of her understanding of performance. Conversely, Michals's article suggests Burney's texts – specifically *Evelina* – have an anti-theatrical agenda, citing Madame Duval as an example of all that was dangerously theatrical. This theme of dangerous theatricality outside of the theatre would later culminate in Burney's last work, *The Wanderer* (Bander 117). As Michals concedes, any anti-theatrical reading only serves to highlight the equally artificial affectation of *Evelina* herself. Furthermore, the narrator of *Evelina* does not condemn the theatre itself, but instead praises the new “naturalistic acting” that was then in vogue (*Evelina* 195). The implication of “naturalistic acting” is that it is increasingly difficult to discern affectation from authentic sensibility beyond the stage. Austen's use of theatre and performance echoes this concern for affectation and authenticity. Touching on Austen's use of private theatricals, Nachumi asserts that *Mansfield Park* is surprisingly ambivalent about the morality of such performances, even though the text frames Fanny's

thoughts and behaviour as theatre. Fanny's self-conscious construction underlines her daily performance as dutiful niece, even if Fanny herself "does not regard such behaviour as acting" (Nachumi 167). Gay further explores these theatrical behaviours in Austen's novels in the codified behaviour within courtship, pointing to the importance of the external and performative markers of "dress, deportment, and etiquette" (23) as essential to successful courtships. Heydt-Stevenson explores the performance present in Austen's texts and explores how the physical body is inseparable from the text. The body and bawdy coexist in Austen's texts, thereby lending further substance to the nature of various bodily performances of her characters. Mary Crawford's "rears and vices" joke "points directly to sodomy in the navy" (Heydt-Stevenson 138) and reveals her inappropriate sexual knowledge. Regarding sensibility and the epistolary tradition, Nagle argues that both Burney and Austen use letters "as a key strategy in producing a new version of Sensibility that brings the passion of sympathy to life" (90). The theatrical and performative nature of sensibility is emphasized in *The Wanderer* and *Persuasion* by the inclusion of these letters. Writing allows for a more direct communication of sensibility without recourse to the body as a medium, while at the same time utilizing the language of nervous bodily constitution in the letter. Left unexplored by these scholars is how the theatrical elements of sensibility interact with disability in Burney's and Austen's novels.

Burney's and Austen's novels contain clear self-awareness of the performative nature of sensibility, but their novels approach sensibility in different ways. Burney's heroes and heroines are full of natural, unaffected sensibility, which the texts attempt to portray as unpractised, usually by using a foil. In Burney's *Camilla*, for example, the unpractised sensibility of Camilla (191) is set off initially by Indiana's affected, practiced performance of sensibility (718). This comparison of the natural and the affected quickly unravels as both Camilla and Indiana perform

sensibility, albeit with various degrees of self-awareness, but the reader cannot escape the performative nature of sensibility. Similarly, foils accompany characters with unaffected sensibility in Austen's novels; however, these foils are not always caricatures of affected Sensibility. Even *Sense and Sensibility*'s Marianne and Elinor Dashwood, who ostensibly represent sensibility and sense respectively, contain nuances and self-awareness absent from Burney's characters. What becomes clear in *Sense and Sensibility* is the necessity of performance in the portrayal of sensibility and that the only differences lie in whether or not the performance is accepted as authentic. As such, Austen's depiction of sensibility does not suffer the same undermining as Burney's heroines. In their criticisms of affected and feigned sensibility, Burney and Austen are identical in their condemnation, especially when the performance of sensibility is an affectation of invalidism. This criticism reveals the necessity of disability for the visibility of Sensibility, and the subsequent narrative necessity of non-normative bodies.

The trope of the imaginary invalid was hardly new when Burney and Austen were writing, yet it was still powerfully evocative. The manipulative *malade imaginaire*, made infamous by Argon in Molière's *The Imaginary Invalid*, runs throughout eighteenth-century literature and medical treatises. Smollett's hypochondriac Matthew Bramble drags his family around England in search of a cure for his non-existent gout in *The Expedition of Humphrey Clinker*. But as Roy Porter points out, hypochondriacs reveal the general anxiety of how easily sickness could turn fatal: "People rarely ignored their physical well-being till they fell sick: life was too precarious, and medicine too feeble, to permit that luxury. The spectre of the hypochondriac shows how readily health anxieties got out of hand" (*Health for Sale* 132). The imaginary invalid stands in not only for health anxieties of the late eighteenth century, but also

all that is suspect about the Culture of Sensibility's reliance on the performance, or affectation, of disability. The infamous ill-health of *Evelina*'s Lady Louisa, *Pride and Prejudice*'s Mrs. Bennet, and *Persuasion*'s Mary Musgrove, play on societal anxieties of invalidism and sensibility, while simultaneously underlining the reliance on performance for both the invalid and the observer.

### 1.1 "Nobody knows how I suffer!"

Lady Louisa's affectation of sensibility functions solely to allow her to claim membership in the Culture of Sensibility; however, her overt theatricality discredits her performance of Sensibility. She has no particular grievance, unlike the miserable marriages of Austen's Mrs. Bennet and Mary Musgrove, yet Lady Louisa uses the performance of disability in a similar, although significantly less nuanced, fashion. After observing Lady Louisa in the tea room following a concert, Evelina writes that Lady Louisa's pretensions to the Culture of Sensibility are so apparent that Evelina describes her a "pretty, but affected young lady" before they are even formally introduced (Burney, *Evelina* 112). During the later Clifton episode, Evelina reports the various bodily performances of Lady Louisa that comprise her displays of sensibility. Evelina writes that Lady Louisa, after acknowledging Mrs. Beaumont, "passed straight to her seat on the sofa, where, leaning her head on her hand, she cast her languishing eyes round the room, with a vacant stare, as if determined, though she looked, not to see who was in it" (285). Lady Louisa's headache, which she claims to "have been dying with... ever since I got up" is the direct result of a ride in Lord Merton's phaeton that "half-killed me, the other morning, with terror!" (285). She further connects her performance of disability with her sensibility by declaring "I am *nerve* all over!" (286) and dramatically reacts to any discussion of a road race using the language of sensibility: "'The very mention of such a scheme,' said Lady



Louisa, taking out her salts, ‘makes me tremble all over!’” (287). Mackie points out, “Lord Merton and Lady Louisa perform the signs of sensibility as they have become conventionalized in social manners. Their inauthenticity is rendered transparent by Evelina’s narrative, informed, as it is, by true sensibility and thus alive to Lord Merton’s hypocrisy and Lady Louisa’s comprehensive egoism” (167). Although I cannot agree that Evelina possesses “true sensibility” as Mackie claims, merely that her performance better conceals its theatrical genesis; she does possess a keen eye for performances of sensibility. Evelina’s educated eye, when trained on the various members of her social circle, recognizes poorly concealed performances of sensibility. Evelina’s criticism of Lady Louisa’s affectation reveals Evelina’s own familiarity with performing sensibility but also exposes narrative tension of condemning one performance as affected when both are learned bodily productions.

Lady Louisa willingly partakes in a self-construction of nervous weakness, an illness that can denote sensibility; however, she requires an audience to interpret her performance correctly. After Sir Clement Willoughby brushes past her and Lord Merton proposes a walk before dinner, Lady Louisa’s response invokes the language of sensibility while performing disability:

“I’m afraid it’s monstrous hot; besides,” (putting her hand to her forehead) “I a’n’t half well; it’s horrid to have such weak nerves! – the least thing in the world discomposes me: I declare, that man’s oddness has given me such a shock, - I don’t know when I shall recover it. But I’m a sad weak creature.” (*Evelina* 361)

As it is Evelina recounting this conversation in a letter to her guardian, her editorial hand is present in the describing the movement of Lady Louisa’s arm. The keen observer, Evelina is aware that Lady Louisa is performing disability in order to appear to display sensibility, and therefore describes her bodily movements as theatrical stage directions in order to heighten Lady

Louisa's affectation of performance. Some of Lady Louisa's immediate audience declare her to be "delicate" (286, 361), a term that denotes her perceived sensibility, although this declaration comes as an implicit condemnation of Mrs. Selwyn, who functions as a foil and is regarded as delicate in neither "body [n]or mind" (361). Mrs. Selwyn's apparent masculinity heightens the appearance of Lady Louisa's feminine delicacy, but this comparison simultaneously reveals the conscious performances of both women. Whether or not Lady Louisa's flatterer Lord Merton would consider her to be as delicate without such a comparison is unclear, although arguably his courtship of Lady Louisa would suffer if he rejected her claims to Sensibility. It is only Evelina's voice that clearly rejects Lady Louisa's pretensions and regards her performance of disability as mere artifice, but then only in a private letter.

While Burney's and Austen's descriptions of both the public and private theatricals provide instructions on how to interpret performances properly, *Evelina* provides the most detailed instructions on how to react while attending the theatre, especially in contrast to the uncouth reactions of her companions. Evelina, who attends more plays and operas than any other character in Burney's novels, admires Garrick over all other actors. Evelina notes the importance of the appearance of naturalness in a performance after her first trip to the theatre:

Such ease! Such vivacity in his manner! Such grace in his motions! Such fire and meaning in his eyes! I could hardly believe he had studied a written part, for every word seemed spoke from the impulse of the moment. His action – at once so graceful and so free! – his voice – so clear, so melodious, yet so wonderfully various in its tones – such animation! – every look *speaks*! (27-8)

Evelina's reaction indicates her ability to judge an authentic performance of sensibility and, by implication, her own ability to dissemble. Nachumi notes the role of performance in Garrick's

use of sensibility in acting: “In order for the public to suspend disbelief, to envision Garrick as a fictional character, he had to be thought to embody, rather than merely represent, the emotions he portrayed” (125). Evelina’s clear enjoyment of Garrick’s use of sensibility in performance is sharply contrasted by later trips to the theatre and opera where her companions are more concerned with themselves than with the action on stage. Kowaleski-Wallace states that this moment of naturalness is a construction:

But there was little that was ‘natural’ in the scene framing Burney’s heroine.

First, Evelina’s intense response to the highly artificial music of a real-life castrato signals not a ‘natural’ sensibility but a historically specific and culturally attuned taste, one that many of Burney’s own contemporaries did not share.

Second, Evelina’s behaviour is also culturally and historically specific to its moment. (152)

In this way, *Evelina* engages with anti-theatricality criticism, specifically the dangers of acting and affectation. As Michals states, “the problem is not so much playing a part as being caught playing to the audience, not acting but ‘affectation’” (194); however, this criticism applies to performers both on stage and off. The stage performances are replaced by individual performances in the audience, as both the actors on stage and the audience in the pit offer masterful examples of how to appear natural after much practice. This practiced normality is essential for the aesthetic of the Sensibility of the body.

The stage performances also serve to highlight the unacknowledged everyday performances. Evelina is repeatedly accused of acting the part of an innocent young woman, as Nachumi points out: “Regardless of the fact that Evelina herself is a paragon of innocence and propriety, her appearance and behaviour are frequently misconstrued by those who observe her”

(133). After watching *Love for Love*, Mr. Lovel harasses Evelina by discussing the performative aspects of female blushing with Sir Clement Willoughby and Captain Mirvan. Evelina is accused of having painted her face in order to appear as though she is blushing, and Lovel further accuses her of affecting to blush in order to hide her own immodesty: “I have known so many different causes for a lady’s colour” (*Evelina* 81). This accusation of affectation has serious implications for the unprotected, single young woman in London, not the least of which is that Evelina is merely playing the part of a modest, virginal girl, and not very convincingly. The ability to discern natural modesty and blushing from affected modesty and blushing is clearly a concern for eighteenth-century conduct book writers, such as Fordyce, who repeatedly emphasizes the importance of blushing to the appearance of modesty (64-65). Fordyce outlines the difference between unaffected blushing, defined as the “the precious colouring of virtue” (64), and affected blushing, which Fordyce argues is the result of sexual awareness and a lack of modesty:

Their ears are wounded by the language of vice: Oaths, imprecations, double meanings, every thing obscene fills them with disgust and horror. But custom soon begets familiarity; and familiarity produces indifference. The emotions of delicacy are less frequent, less strong. And now they seldom blush, although perhaps they often affect it. At the image of sin they tremble no longer: their minds are already debauched. (65)

This distinction between real and affected blushing is echoed in Orville’s own opinion concerning Evelina’s blushing: “the difference of natural and of artificial colour, seems to me very easily discerned; that of Nature, is mottled, and varying; that of art, *set*, and *too* smooth; it wants animation, that glow, that *indescribable something* which, even now that I see it, wholly

surpasses all my powers of expression” (*Evelina* 81). Orville, who echoes both Fordyce and Burke here, debates the authenticity of blushing. The effect of this debate is Evelina’s increased awareness of the ease with which her body can be misread. Following her experiences at the opera and theatre, both the text and *Evelina* display heightened awareness of the importance of concealing the inherent theatricality of performances of sensibility, as well as the necessary skill of correctly reading another’s body.

Just as *Evelina* disregards Lady Louisa’s claims of sensibility as affectation, the narrator of *Pride and Prejudice* regards Mrs. Bennet’s proclamations of poor nerves as part of a performance of disability designed to prove sensibility and gain sympathy from her family. Mrs. Bennet’s long-suffering nerves have always been a point of ridicule and comedy for readers of *Pride and Prejudice*. Film adaptations frequently reduce her to a comic figure because of her complaint that “nobody is on my side, nobody takes part with me, I am cruelly used, nobody feels for my nerves” (126). Wiltshire, however, suggests that her constant complaints stem from her lack of power within the Bennet household:

her nerves (to take them seriously for a moment – no one else does) thus function in two ways: as real distress, the result of anger, humiliation and powerlessness, and as modes of recuperation – as attempts to rescue herself as a centre of attention, if not of actual authority. (“Jane Austen” 133)

Mrs. Bennet’s delicate nerves only bother her when things fail to go according to her plan, thereby jeopardizing her family’s financial security, be it when Mr. Bennet refuses to meet Mr. Bingley (*Pride and Prejudice* 5), when Elizabeth refuses Mr. Collins’s proposal (126), or when Lydia disappears with Wickham (303). However, it is not because of Mrs. Bennet’s nerves that readers refuse to take her seriously, but because of her clear affectation of nervous sensibility.

After Lydia's disappearance with Wickham, Mrs. Bennet takes ill immediately (303), but makes a miraculous and nearly instantaneous recovery upon the news of Lydia's engagement: "It was a fortnight since Mrs. Bennet has been down stairs, but on this happy day, she again took her seat at the head of her table, and in spirits oppressively high" (342). All her nervous ailments disappear into wedding plans. In this way, Mrs. Bennet is disabled both by her supposed ill health and by the text itself, which prevents her from being taken seriously.

The performative, affected nature of Mrs. Bennet's sensibility is clear from the opening pages. While Mrs. Bennet describes herself as nervous, the narrator makes it clear that this is nothing more than a fanciful self-diagnosis: "She was a woman of mean understanding, little information, and uncertain temper. When she was discontented she fancied herself nervous" (5). This is similar to Evelina's observation of Lady Louisa's affectation, which is privately stated in a letter, but never publicly admitted. Austen's narrator directs readers to disregard Mrs. Bennet's complaints as flights of fancy, thereby dismissing her nervous complaints as frivolous when they appear later in the text. Consequently, when Elizabeth refuses Mr. Collins's proposal, which would ensure the financial security of all the Bennet girls and their mother after Mr. Bennet's death, Mrs. Bennet's nervous complaints are dismissed both by the characters and the readers as the overreactions of a silly woman in order to gain attention.

Mrs. Bennet's concerns, however, are perfectly logical and couching her complaints within the language of sensibility should garner her some attention were her performance of disability considered authentic. However, her inconsistent performance of disability results in her family ignoring her legitimate anxieties. Mrs. Bennet complains that she does not "have much pleasure indeed in talking to anybody. People who suffer as I do from nervous complaints can have no great inclination for talking. Nobody can tell what I suffer! – But it is always so.

Those who do not complain are never pitied” (126-7). She then goes on to voice her complaints at length, thereby proving that regardless of her protestations, her nervous complaints do not interfere with her ability to speak. Mrs. Bennet’s inability to act the part convincingly undermines her reasonable concerns for her daughters’ financial security and the text undermines Mrs. Bennet’s nervous complaints by refusing to give them credence. Following Lydia’s engagement to Wickham, Mr. Bennet quickly brushes aside his financial concerns with the realization that “he would scarcely be ten pounds a year the loser” (341) and so “he naturally turned to all his former indolence” (341) regarding his estates. Clearly Mrs. Bennet’s concerns are justified, even as both the narrator and her family dismiss them; however, her inability to dissemble the theatricality of her performance, alongside her inconsistency, effectively reduces Mrs. Bennet’s power within the household.

In *Persuasion* Mary Musgrove’s performance of disability, like that of Mrs. Bennet, stems from her legitimate complaint of her husband’s inattention towards her and lack of engagement with their children. Her performance also serves to show how much she suffers mentally from her loveless marriage. Because of her clear affectation, however, the reader is once again encouraged to dismiss Mary’s performance as nothing more than malingering. Mary’s affected sensibility contrasts with the sensibility of her sister, Anne, which is accepted as a more authentic sensibility. Like Mrs. Bennet, Mary uses the language of sensibility in an effort to legitimize her suffering. In fact, Mary parrots Mrs. Bennet, complaining that “nobody knew how much she should suffer” (*Persuasion* 51) if forced to visit the Crofts in Kellynch Hall. Furthermore, Charles Musgrove also echoes the narrator of *Pride and Prejudice* when he tells Anne “I wish you could persuade Mary not to be always fancying herself ill” (47). As with Mrs. Bennet, Mary’s inability to sustain her performance of disability ultimately undermines her

pretensions to sensibility and the reader's sympathy for her situation.

The symptoms of sensibility and disability are easily conflated by Mary's performance of illness. Mary, who is "often a little unwell, and always thinking a great deal of her complaints" (35), is first introduced to the reader as she lies "so ill [she] can hardly speak" (40), a trait also found in both Lady Louisa's and Mrs. Bennet's performances of sensibility. Mary continues the scene speaking a great deal for someone so gravely ill. Using the language of nervous sensibility, Mary complains that she is too ill to speak, worried that she could "be seized of a sudden in some dreadful way" (40), all while she lies on the sofa (39), unable to move herself to ring the bell (40). Mary cannot sustain the performance of disability and "she could soon sit upright on the sofa, and began to hope she might be able to leave it by dinner-time. Then, *forgetting to think about it*, she was at the other end of the room, beautifying a nosegay; then she ate her cold meat; and then she was well enough to propose a little walk" (42, emphasis added). Mary miraculously recovers from her most trying illness (40), which was the result of being seated uncomfortably between Henrietta and Louisa in a carriage (42), within the span of a few minutes conversation with Anne, thereby proving the illness's spurious genesis. The sole purpose of Mary's illness is to claim attention from her husband, who had gone shooting rather than playing nursemaid (40), although this plan arguably fails as only Anne gives Mary attention. And as with Mrs. Bennet, Mary undermines her credibility with her audience; however, the text also undermines Mary's complaints by making her affectation clear to the reader by attacking her inauthentic performance and her self-directed sensibility. Rather than outside influence affecting her sensibility, Mary's complaints are brought on by perceived inattention from her family.

Unlike Lady Louisa's relatively harmless pretensions to the Culture of Sensibility, Mary's affectations have serious, familial implications as she is incapable of caring for her son and his



broken collarbone. Wiltshire argues there is an impact of class difference in the performance of sensibility. For *Evelina*'s Lady Louisa, as a wealthy woman, "illness becomes a mode of compulsion" for those around them, but Mary, because she is "socially less privileged, illness or debility or merely physical weakness may function in a parallel way, to gain a minimal social leverage, consideration or opportunities otherwise denied" (Wiltshire, "Jane Austen" 132). Mary's affectation of sensibility allows her to gain additional social status over Anne, who in turn is reduced to a nursemaid. Anne's superior sensibility, although not without its own performative agenda, provides a stark contrast to Mary's affected sensibility and strongly echoes Hannah More's criticism of affectation in her "Sensibility: A Poem".<sup>6</sup> Mary displays only slight pretensions to sensibility when Charles injures his collarbone. In place of "Mercy stretching out, ere Want can speak, / To wipe the tear from pale Affliction's cheek" (More 279), Mary declares herself incapable of caring for her injured son because of her weakened nerves while simultaneously affecting sensibility. She claims "I am more unfit than any body else to be about the child. My being the mother is the very reason why my feelings should not be tried. I am not at all equal to it. You saw how hysterical I was yesterday.... I have not the nerve for the sort of thing" (*Persuasion* 60-61). Although she appropriates the language of nervous sensibility, Mary's lack of desire to care for her injured son undermines her performance of sensibility. Furthermore, Mary recovers her nerves as soon as Anne takes responsibility for young Charles, thereby allowing Mary to enjoy herself at dinner having absolved herself of the task of caring for her injured son. The performance of illness lasts only until Mary achieves her particular goal and, as a result Mary is unable to sustain consistently the appearance of sensibility.

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<sup>6</sup> Austen mentions Hannah More's *Coelb's Search for a Wife* as evidence of prudishness in *Catharine; or, The Bower*, and in her letter to Cassandra she mentions "pedantry and affectation" (172) in the text, but More's appearance in Austen's *Persuasion* is more favourable to More.

While Lady Louisa's headaches and nervousness are relatively harmless to those around her, Mrs. Bennet's and Mary's affected sensibility reflect their inability to cope with the realities of their lives. Mary feigns illness when she feels abandoned by her husband or incapable of caring for her child. Mrs. Bennet's nerves attack her when her family brushes aside her legitimate concerns. Wiltshire maintains that the complaints of Mary and Mrs. Bennet "signal, and are a conversion of, frustration, including sexual frustration, and the need to obtain control of some sort" ("Medicine, illness and disease" 314). Rather than simply reproducing the archetype of the *invalide* present in *Evelina*'s Lady Louisa, Austen hints at the dissatisfaction at the core of these theatrical performances of disability. For Austen's Mary and Mrs. Bennet, the affectation of sensibility through the performance of disability provides an opportunity to verbalize discontent without having to state the cause of dissatisfaction. Much as the young woman's blush functions to signal a limited sexual knowledge without stigmatizing her as immodest, the performance of nervous illness signifies mental duress without explicitly revealing Mary's and Mrs. Bennet's unhappy and loveless marriages. The failure of Lady Louisa, Mary, and Mrs. Bennet to conceal the theatricality of their respective performances reveals the importance placed on concealment by their respective critics.

## **1.2 Power and Performance**

In Burney's *The Wanderer*, Mrs. Ireton's claim to sensibility through the performance of disability is slightly more complicated than the straightforward ridiculousness of Lady Louisa, or the sublimation of Mrs. Bennet and Mary Musgrove. Unlike Mrs. Bennet and Mary, who perform disability to gain attention and a small degree of power over their lives, Mrs. Ireton's performances have a more malevolent objective. While Mrs. Bennet and Mary demand attention from their respective families, Mrs. Ireton, who by virtue of her social class has more power than

Juliet, uses her performance of disability and affectation to the Culture of Sensibility to control and overpower Juliet, thereby taking advantage of Juliet's precarious social situation. Mrs. Ireton appropriates the language of nervous sensibility in order to achieve her goals, even though, as Barker-Benfield points out, she has "a 'constitutional hardness of nerve that cannot feel,' an essential characteristic of all the villains in the literature of sensibility" (17). Mrs. Ireton's use of sensibility highlights how the language can be co-opted, although her inability to dissemble consistently is eventually exposed with the stark contrast of Juliet's more authentic performance of Sensibility, which functions as a foil.

Mrs. Ireton is not ill but uses the status conferred by illness within the Culture of Sensibility to manipulate those around her. The narrator states that after the cross-Channel voyage, Mrs. Ireton is "still somewhat disordered from her voyage, though by no means as much in need of assistance for her shattered frame, as of amusement for her restless mind" (Burney, *Wanderer* 39). The primary cause of her discomfort is that "her son had set off without her" (39) to London after arriving in England, and not from the terrifying sea voyage from France. Like both Mrs. Bennet and Mary Musgrove, Mrs. Ireton uses a performance of disability in order to assert a position of prominence. This position is made explicit in Mrs. Ireton's rage at Juliet's refusal to answer her questions concerning her transformation in appearance:

The astonished Mrs. Ireton was in a speechless rage at this unbidden retreat.... She speedily, therefore, dispatched a messenger, to say that she was taken dangerous ill, and to desire that the young woman would return. The Incognita... had scarcely entered the apartment, when Mrs. Ireton, starting, and forgetting her new illness, exclaimed in a powerful voice, 'Why, what is become of your black patch?' (44)

Mrs. Ireton's illness is a ruse, but by performing disability she is able to reassert her power over the friendless Juliet. She continues to lecture Juliet on the questionable tactics of affectation of appearance, all the while oblivious to her own affectations:

What business is it of mine to confine your genius to only one or two methods of maiming or defacing yourself? As if you did not find it more amusing to be one day lame, and another blind; and, to-day, it should seem, dumb? The round must be entertaining enough? Pray do you make it methodically? Or just as the humour strikes you? (45)

As she has no qualms in appropriating illness herself, Mrs. Ireton assumes that Juliet is similarly experienced in the performance of disability for personal gain. The text here is uncomfortable, as Juliet is as guilty as Mrs. Ireton, because both are actively performing a particular role for individual gain. Anderson points out that Juliet "disguises herself based on others' standards for testing status and character, while she functions as the moral standard to narrator and reader apply in their assessments of other characters" (439). In condemning Mrs. Ireton for her affectation, the text also risks admonishing Juliet for concealing her true identity and performing as Ellis. This reflects Burney's difficulty in resolving the tension between affected and authentic sensibility.

Later in the novel, Mrs. Ireton appropriates the language of nervous sensibility in her performance of disability. After being bothered by her house staff, Mrs. Ireton complains that "“you turn me sick! I am ready to faint! What horrible images you present to me! Has nobody any salts? Any lavender-water? How unfortunate it is to have such nerves, such sensations, when one lives with such mere speaking machines!”" (*The Wanderer* 481). Mrs. Ireton is also gifted with the ability for a quick recovery from a dangerous nervous illness, as seen during her

trip to the Temple. When Juliet attempts to leave, “Mrs. Ireton, suspicious of her purpose, flung herself languishingly upon a seat, and complained that she was seized with such an immoderate pain in her side” (559). However, upon Juliet’s return to Mrs. Ireton’s service, “Mrs. Ireton instantly recovered” (559), only to fall ill yet again when Juliet finally succeeds in disengaging herself from her employer: “Mrs. Ireton, therefore, found it expedient to be again taken ill; and after a little fretful moaning, ‘I feel quite shaken,’ she cried, ‘quite in a tremour’” (560). The text refuses to allow the reader to take Mrs. Ireton’s complaints seriously, yet her fellow characters must or risk failing in their own performances of Sensibility. Should Juliet fail to perform Sensibility adequately, Mrs. Ireton can call Juliet’s morality into further question, which is already suspect because of the mystery surrounding her origins and initial costumed appearance thereby jeopardising Juliet’s precarious social standing.

Furthermore, it is clear that Mrs. Ireton is familiar with the causes of ill health and their social effects. Early on, she recites the perceived moral and mental benefits of nervous sensibility to Juliet: “Or perhaps you think me so robust, that it would be kind to give me a little indisposition, to prevent my growing too boisterous? You may deem my strength and health to be overbearing? And be so good as to intend making me more delicate? You may be of the opinion that it would render me more interesting?” (40). Mrs. Ireton’s statement highlights the popular beliefs surrounding illness and invalids. Seen as a curative for particular behaviours, such as Mrs. Ireton’s self-professed boisterousness, illness also has the ability to bestow distinction by proving sensibility. However, while she appears to condemn this concept, she spends the majority of the novel affecting various delicate states of health precisely to achieve such status, gain attention, and require particular responses from her attendants, family, and acquaintances. Because of her social standing, ignoring or ridiculing her affectations risks

failing to prove one's own sensibility and possible expulsion from the Culture of Sensibility. As a result, Juliet must continue to dissemble her own feelings regarding Mrs. Ireton's affectation. Juliet's superior ability to conceal the theatricality of her performance is what defines her as part of the Culture of Sensibility, while Mrs. Ireton's affectation is condemned.

### **1.3 Method Acting**

Failure to commit fully to a performance of disability results in exclusion from the culture of Sensibility; however, an undeterred and consistent commitment to perform disability in order to prove sensibility is potentially disruptive and dangerous to the performer. Marianne Dashwood's performance of disability in *Sense and Sensibility* strongly echoes that of Camilla in Burney's *Camilla*. Like Camilla, Marianne actively engages in behaviour that endangers her health in order to prove the authenticity of her sensibility to a larger audience. After Camilla sends word to her family and begins to feel ill, her

ever eager imagination made her apprehensive her friends might find her too well, and suspect her representation was but to alarm them into returning kindness. A fourth night, therefore, passed without sleep, or the refreshment of taking off her cloaths; and by the time the morning sun shone in upon her apartment, she was too seriously disordered to make her illness require the aid of fancy. (Burney, *Camilla* 866)

Insomnia, personal neglect, and starvation are necessary for Camilla's intended audience to accept her performance, which is grounded in her understanding of how Sensibility appears. Like Camilla, Marianne performs her illness before an audience she desires to influence. Similar to Mrs. Bennet, Mary Musgrove, and Lady Louisa, Marianne's performance is conscious and practiced. After Willoughby's quick departure from Barton Cottage, Marianne indulges her

natural sensibility in order to prove her feelings to be more potent. The narrator states that

Marianne would have thought herself very inexcusable had she been able to sleep at all the first night after parting from Willoughby. She would have been ashamed to look her family in the face the next morning, had she not risen from her bed in more need of repose than when she lay down in it. But the feelings which made such composure a disgrace, left her in no danger of incurring it. She was awake the whole night, and wept the greatest part of it. She got up with an headache, was unable to talk, and unwilling to take any nourishment. (Austen, *Sense and Sensibility* 96)

Marianne's performance amplifies her natural sensibility, allowing her sensibility to be visible through the presence of disability (her speechlessness, headache, and lack of appetite). Gay states that Marianne quickly embraces her role as a tragic heroine because "she has been waiting all her young life to play it" (38). Small notices Marianne's inability to conceal her performance, but cannot argue that Marianne's performance is inconsistent:

*Sense and Sensibility* continually reminds us that Marianne is *acting* the role of suffering romantic heroine. Always the same charge is laid against her, explicitly and implicitly: that she indulges, feeds, courts her grief, inflicts it on other people, indeed that she can measure it by the pain she gives to others. Far from powerless, she is, evidently, 'potent' and using her power selfishly. (95)

While she does not conceal the theatricality of the performance, she is nevertheless utterly consistent and committed to it. Her sleepless night is followed by a ritualistic indulgence in everything that reminds her of Willoughby: "She played over every favourite song that she had been used to play to Willoughby" resulting in a heart that "was so heavy that no farther sadness

could be gained; and this nourishment of grief was every day applied” (Austen, *Sense and Sensibility* 96). This repeated performance becomes a naturalized exercise for Marianne. Both her immediate reactions to Willoughby’s betrayal and her daily ritualized performances of sensibility are acts that take on a natural appearance through sheer repetition. Like Butler’s definition of gender, Marianne’s performance is a “repeated stylization of the body” (*Gender Trouble* 45) designed to appear natural; however, because of Marianne’s overt theatricality in performing her conception of how sensibility should appear, her performance results in the subversion of her sensibility as a natural and innate trait.

Unlike the physicality of Mrs. Bennet, Mary Musgrove, and Lady Louisa, Marianne combines the physicality of theatrical sensibility with the performance of melancholy. Following her unsuccessful encounter with Willoughby in London, Marianne engages in a performance of disability that the text describes as melancholia. Seemingly oblivious to the “cold, gloomy morning in January, Marianne, only half dressed, was kneeling against one of the window-seats for the sake of all the little light she could command from it, and writing as fast as a continual flow of tears would permit her” (*Sense and Sensibility* 205). Elinor believes Marianne’s behaviour to be the outward manifestation of “nervous irritability” (205), a symptom of melancholia (Copeland 474). The performance continues as Marianne “neither ate, nor attempted to eat any thing” (*Sense and Sensibility* 206) at breakfast, causing Mrs. Jennings to comment that Marianne looks “so ill and forlorn” (207), and culminates in Marianne’s nervous faintness:

Elinor... returned to Marianne, whom she found attempting to rise from the bed, and whom she reached just in time to prevent her from falling on the floor, faint and giddy from a long want of proper rest and food; for it was many days since



she had any appetite, and many nights since she had really slept; and now, when her mind was no longer supported by the fever of suspense, the consequence of all this was felt in an aching head, a weakened stomach, and a general nervous faintness. (210)

This is the increasing danger of performing sensibility; in order for her sensibility to be considered authentic, Marianne cannot risk deviation from these set-pieces of the performance of melancholy. Marianne's performance then evolves into near hysteria:

Elinor advised her to lie down again, and for a moment she did so; but no attitude could give her ease; and in restless pain of mind and body she moved from one posture to another, till growing more and more hysterical, her sister could with difficulty keep her on the bed at all. (217)

Furthermore, through indulging her performance of deep sensibility by wandering the woods around Cleveland in the hopes of spying Combe Magna, Marianne falls ill with a disorder "with a putrid tendency" (347). Copeland notes this disorder as a possible reference to diphtheria or typhus (494), which shifts Marianne from the affectation of illness to the affliction of illness, thus solidifying her claim to sensibility. The text suggests that Marianne moves towards this point of verifiable and potentially lethal illness because of her frequent repetitions of the same performance, which in turn leaves Marianne culpable. It is this cultivated sensibility that endangers Marianne's life. Small suggests "Austen's language vacillates between presenting Marianne as actively cultivating a false sensibility and presenting her as the victim of a sincerely suffering sensibility" (96). This vacillation in turn exposes the textual tension regarding Marianne's affectation of sensibility.

Marianne's affected sensibility is obvious when compared to her similarly suffering

sister, Elinor; however, this comparison, set up in the novel's title, is soon undermined when Elinor's own actions are examined. Like Marianne, Elinor is jilted by a man she concedes to "greatly esteem" (*Sense and Sensibility* 24), but is accused of coldness by Marianne because Elinor does not perform sensibility in a similar fashion to Marianne. In Marianne's view, her own performance of sensibility is authentic, while Elinor's performance is wanting; however, a close reading of the text reveals that although Elinor carries much of the "sense" hinted at by the book's title, she also has an equal claim to sensibility. Because Elinor's sensibility is less overtly performative, it tends to be glossed over by readers in favour of the more expressively theatrical Marianne. Elinor's sensibility, while also a performance, does not carry the same subversion of sensibility that Marianne's performance entails because she relies less on the physical manifestations of sleeplessness and starvation. It is Elinor's mental anguish and verbal declarations that prove her sensibility. This portrayal is perhaps closest to what the various conduct book writers termed sensibility, but because it is not performed with the same fervour or illness as Marianne, Elinor's sensibility is labelled inauthentic or, by some audiences, non-existent, thereby excluding Elinor from similar status as Marianne within the Culture of Sensibility.

The narrator's descriptions of Elinor's and Marianne's inner speech patterns further highlight their different approaches to sensibility. Small notes Austen's use of dashes during Marianne's particularly sentimental passages: "The dashes which punctuate the text, at once joining opposing tones and marking their opposition, reveal Austen's appropriation of one of the trademarks of sentimentalism, even as she denies the sentimental reader the pleasure of indulging in convention" (103). Similarly, Ward sees these dashes as integral to the sentimental figure, as "vocabulary, tone, even the dashes and colons that punctuate the respective scenes, belong to

what recent critics of sentimental novel, following Julia Kristeva's theory of semiotics, have classified as conventions of women's writing" (94). For example, as Marianne leaves Norland, her sentimental speech is full of dashes and exclamations:

"Dear, dear Norland!" said Marianne, as she wandered alone before the house, on the last evening of their being there; "when shall I cease to regret you! – when learn to feel a home elsewhere! – Oh! happy house, could you know what I suffer in now viewing you from this spot, from whence perhaps I may view you no more! – And you, ye well-known trees! – but you will continue the same. – No leaf will decay because we are removed, nor any branch become motionless although we observe you no longer! – No; you will continue the same; unconscious of the pleasure or the regret you occasion, and insensible of any change in those who walk under your shade! – But who will remain to enjoy you?" (*Sense and Sensibility* 32)

Her rushed speech reflects Marianne's own construction of sensibility, that it must be energetic, active, performative, almost Gothic, but not necessarily observed by an audience. By allowing the reader, but not the other characters, to watch Marianne's sentimental farewell to Norland, the text gives the impression that Marianne's speech is spontaneous and her sensibility is authentic. Yet Marianne speaks this address to Norland aloud, which is in itself a performative act. The overabundance of dashes, which serve as a marker of both pace and Marianne's own rapid, silted, and halting thoughts, further emphasizes Marianne's construction of sensibility.

In contrast, Elinor's speeches contain dashes when she is clearly attempting to dissemble her feelings; that is, dashed speech is present when Elinor performs an act of self-censorship. When cross-examined by Marianne concerning Elinor's feelings for Edward, Elinor haltingly

states “I do not attempt to deny I think very highly of him – that I greatly esteem, that I like him” (24). But does it follow that Elinor’s sensibility is less violent or powerful than Marianne’s? When it is mistakenly presumed that Edward Ferrars has married Lucy Steele, Elinor’s violently emotional reaction shocks both her mother and sister:

Marianne gave a violent start, fixed her eyes on Elinor, saw her turning pale, and fell back in her chair in hysterics. Mrs. Dashwood... was shocked to perceive by Elinor’s countenance how much she really suffered, and in a moment afterwards, alike distressed by Marianne’s situation, knew not on which child to bestow her principal attention. (400)

Although Marianne’s reaction is more theatrical, the paleness of Elinor’s face, as well as her speechlessness, underlines Elinor’s sensibility. Mrs. Dashwood’s inability to recognize Elinor’s attachment to Edward until this moment is because of Elinor’s superior ability to dissemble.

Mrs. Dashwood

feared that under this persuasion she had been unjust, inattentive, nay, almost unkind, to her Elinor; - that Marianne’s affliction because more acknowledged, more immediately before her, had too much engrossed her tenderness, and led her away to forget that in Elinor she might have a daughter suffering almost as much, certainly with less self-provocation, and greater fortitude. (403)

In light of Marianne’s hysterics, Elinor’s performance of sensibility appears more unpractised and authentic; however, the proof of Elinor’s sensibility is the physicality of her reaction. *Sense and Sensibility*, therefore, cannot be read as Elinor representing sense and Marianne sensibility, as this completely ignores the performative aspects of sensibility exhibited by both the heroines. Rather than strictly a condemnation of excessive sensibility, *Sense and Sensibility* forces readers

to question the authenticity of any sensibility in light of its performative requirements.

#### **1.4 Theatricality of *The Wanderer* and *Mansfield Park***

In 1814, Burney and Austen both published intensely theatrical novels that feature an outsider of uncertain social standing attempting to navigate the daily performances of upper class society, thereby exploring the relationship between performance and sensibility. As Elaine Bander argues, because Burney began composing *The Wanderer* in the 1790s (115), it predates Austen's *Mansfield Park* both in composition and thematic elements. The outbreak of Napoleonic War between France and the United Kingdom delayed publication of *The Wanderer*, as Burney was unable to leave France. Therefore, although published in the same year as *Mansfield Park*, *The Wanderer* has a distinctive pre-Romantic and Wollstonecraftian treatment of sensibility and invalidism that renders it outmoded, especially when compared with Austen's *Mansfield Park*. The heavy moralizing tone, perfectly in keeping with 1790s sentimental literature, is jarring here. Elinor Joddrell's various suicide attempts, which recall those of Mary Wollstonecraft, are overwrought and dramatic. Indeed, the connection to Wollstonecraft and Wollstonecraftian feminism runs throughout the novel. As Margaret Doody points out, even as Elinor debates Wollstonecraftian feminism with Juliet, she is never refuted or corrected (xxx). Wollstonecraftian feminism is not the issue; rather, it is the misapplication of this feminism that is at the root of Elinor's troubles. However, the text does not set out to treat Elinor as an outright caricature of misdirected feminism, and even grants her enlightenment by the end of the novel. This positive portrayal of feminism led to a number of hostile reviews, the chief criticism being that Burney was a female, and therefore inferior, writer. In her examinations of the critical responses to *The Wanderer*, Doody notes that Hazlitt "uses his review of *The Wanderer* to disparage all of Burney's works" (333). While the first edition sold out immediately, the

negative reviews by Crocker and Hazlitt in 1815 ensured that the second edition was an abject failure. Doody outlines the critical response to *The Wanderer*, stating

the first edition sold out at once, and a second edition had to be run off at the time of publication; 3500 copies were sold almost instantly – an extremely large issue of a novel for the time. It is interesting that the reviewers were stimulated into dealing with the novel almost at once. With unusual rapidity for the time (by the next month), they extinguished it. It was the reviewers who very authoritatively expressed the view that the work was an utter failure, unendurable to persons of taste. (332)

*The Wanderer* was not published again until Virago Press's edition in 1984, followed closely by Oxford University Press's edition in 1988. The text remains divisive, with some Burney scholars finding it derivative and others, revolutionary.<sup>7</sup> In her letters, Austen is aware of the new Burney novel, but if she had a reaction to it, no letter remains to give any indication. Intriguing, however, is the coincidental fact that both *Mansfield Park* and *The Wanderer* concern female heroines who are without significant familial protection and are accused of acting a part. In the treatment of these heroines' sensibilities, Burney's text shows its age. While both heroines perform sensibility, Fanny Price's sensibility is significantly more nuanced than that of Juliet

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<sup>7</sup> Initially scholars agreed that *The Wanderer* is not up to the same standard as her earlier novels, hindered by sentimentalism that had become passé during her long absence from England (Bander 122). Criticism of *The Wanderer* as derivative focuses on Burney's recourse to the tropes of the sentimental novel. Julia Epstein and Judy Simons both register their disappointment in Burney's final novel (Anderson 425-426). Hodgson-Anderson believes the failure of the novel lies with the novelist's self-censorship and repression (648). Recently scholars have applied a feminist reading of *The Wanderer*, which has resulted in a reappraisal of the novel, including Epstein, Shaffer, Anderson, and Wallace. Bilger argues that the Berthas of Victorian literature have their foundation in Elinor Joddrell (383). Juliet McMaster argues that *The Wanderer* is "a novel of ideas" because it is informed by the Napoleonic Wars, Wollstonecraftian feminism, and the Romantic movement (247).

Granville, and reflects the greater suspicion and lessened influence of sensibility immediately following the French Revolution and Napoleon's ascendancy.

Like *Sense and Sensibility*, *The Wanderer* also explores the role of disability in the production of sensibility; however, *The Wanderer* is less subtle about the necessity of performance. Similar to *Sense and Sensibility*'s Marianne, *The Wanderer*'s Elinor is a jilted lover, obsessed with the man who has refused her. In order to prove her devotion, she determines to show how Harleigh's spurning of her has affected her sensibility in a manner similar to that of Marianne by repeated and increasingly elaborate performances of melancholia. Rather than refusing to eat or sleep, like Marianne Dashwood, Elinor launches a series of increasingly elaborate suicide attempts to prove her devotion to Harleigh. When Elinor appears, it inevitably signifies more emotional and mental trials for Juliet and the text seems determined to silence her in favour of Juliet. In the end, Elinor is denied a romantic ending with her beloved Harleigh in favour of moral growth, like that of Marianne Dashwood, thereby allowing for the moral correction of the illness narrative.<sup>8</sup> Upon learning Harleigh married Juliet, Elinor finds that

despair, with its grimmest horror, grasped her heart at this self-detection; but pride supported her spirit; and Time, the healer of woe, though the destroyer of life, moderated her passions, in annihilating her expectations; and, when her better qualities found opportunity for exertion, her excentricities [sic], though always what were most conspicuous her character, ceased to absorb her whole being.

(*The Wanderer* 872-3)

But even this moralized ending for Elinor failed to mollify her critics. It was Elinor's

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<sup>8</sup> A full discussion of Marianne's illness narrative can be found in Chapter Three

Wollstonecraftian character that disturbed critics, prompting near-universal condemnation of *The Wanderer*, which led to its own nearly non-existent publishing history and an effective disabling of the text itself (Doody 332).

While the cause of Elinor's consumptive illness is her previous mental conflict, her overtly theatrical performance of sensibility through disability frames her increasing melancholia and suicidal obsession as an affectation aimed at gaining Harleigh's attention. After first meeting and immediately becoming besotted with Harleigh, the older brother of her fiancé, "the conflict of her mind, during this doubting state, threatened to cast her into a consumption" (*The Wanderer* 155). This slightly contradicts Juliet's earlier description of Elinor's previous ill health, which completely ignores her mental agitation and claims that "repeated colds, ill treated, or neglected, had menaced her with a consumption" (54). Unlike Marianne's near-death experience, Elinor's illness in France does not work as a moral or behavioural corrective. While Elinor is declared healthy upon her return to England, her infatuation with Harleigh soon manifests itself as suicidal obsession. Elinor's suicide attempts soon become more elaborate performances that require theatrical staging. Elinor's performance of melancholy is rooted in her desire to appear as the tragic heroine of her own life's play, as that will prove her to be a more authentic and devoted lover than Juliet. She frames her actions and responses within her understanding of tragedies by using theatrical language and staging. Because Elinor makes the theatricality explicit, attention is drawn immediately to the performative requirements of Sensibility; however, because her sensibility is revealed as affected, her performance is subverted and labelled as inauthentic.

Elinor's desire to perform melancholy acquires a theatrical bent, resulting in her inability to separate herself from the play she believes she is enacting. Elinor is clearly aware of her



ability to perform and the necessity for theatricality. She describes her planned performance of Wollstonecraftian madness using theatrical language. In discussing her plans to confront Harleigh, Elinor separates the events by scene: “My operations are to commence thus: Act I. Scene I. Enter Ellis, seeking Albert... Scene II. Albert and Ellis meet” (157). She concludes her speech to Juliet, stating “the rest of my plot is not yet quite ripe for disclosure. But all is arranged. And though I know not whether the catastrophe will be tragic or comic, I am prepared in my part for either” (157). Elinor gives herself wholly over to affecting the performance narrative of the tragic, sentimental heroine. Later, when she attempts suicide in the church, Elinor states “our tragic-comedy has a long last act” (581). After that failed attempt, Elinor tells Juliet that she has “studied how to finish my career with most effect” (586). Her suicide is much more than a facet of her melancholy, but rather the only way Elinor can end her performance within the narrative bounds she has set. And like all performances, it must be witnessed to be effective; therefore, Elinor is careful only to attempt suicide when Harleigh is able to witness the physical performance of her inner turmoil. Elinor’s heavy emphasis on theatrical language and scripting her suicidal gestures as the actions of a tragic heroine indicate the degree to which the Culture of Sensibility requires mental processes to have physicality in order for these processes to be visible. In other words, the only way to prove her melancholy in a language commonly understood is to perform as a melancholic, tragic heroine. Eventually, Elinor not only characterizes her own actions as part of a play, but the actions of those around her as well. Dismissing the aid of the physician Mr. Naird, Elinor cries “away with this burlesque dumb shew” (377), indicating her almost pathological framing of reality as theatre. Elinor is incapable of separating the performance from the reality because the performance has become her reality.

*Mansfield Park* and *The Wanderer* share more than the same publication year; both

novels feature heroines who blur the distinction between sensibility and disability with an inner theatricality. Both Fanny Price and Juliet Granville are at the mercy of the whims of friends and family, and must prove sensibility in order to maintain their precarious social position. Relying on disability to prove their sensibility, both Fanny and Juliet are described as delicate, an innate weakness believed to be symptomatic of heightened sensibility. Although their sensibility may give them the veneer of propriety to their audiences, of which they are undeniably conscious, the inner monologues of both heroines reveal how these performances are deliberately constructed. However, because of the lengthy writing process of *The Wanderer*, Juliet's active engagement with Wollstonecraftian feminism appears anachronistic when compared to Fanny in *Mansfield Park*, who gains autonomy not through feminism but through her acting ability (Nachumi 167).

The exact nature of Fanny Price's illness is never made explicit, but almost all those around her treat her as delicate and weak. Vague descriptors of smallness and general weakness distinguish Fanny from her more robust female cousins. Compared to Maria and Julia, Fanny is "small of her age" (Austen, *Mansfield Park* 13) with inferiority of "strength" (19), and requires regular exercise on a horse for her health (82). Initially, Fanny's appearance of general, nameless weakness draws concern from Edmund, indifference from her female cousins, and ire from Aunt Norris. It is only through Fanny's bodily appearance, and not by any statement she makes, that the "danger of feeling the loss of her health" is understood (41). After being misused by both her aunts, the attentive Edmund "perceived its ill effects" on Fanny's health (41). That is, Edmund's gaze results in Fanny's demarcation as delicate. Later, during the Sotherton expedition, it is Edmund, not Fanny or Mary, once again who pronounces Fanny's health in danger because of overexertion: "'I am afraid you are very tired, Fanny,' said Edmund, observing her; 'why would not you speak sooner?'" (111). In contrast, Mary Crawford bristles

with energy, unable even to remain sitting on the bench because, as she proclaims, ““resting fatigues me”” (112). Although Fanny protests that “she was rested, and would have moved too” (112), Edmund convinces her to remain on the bench while he and Mary walk off together, leaving Fanny “with great regret that she was not stronger” (112). Whether or not Fanny is capable of continuing to walk is immaterial, as Fanny’s previously established delicate health provides Edmund with enough pre-text to leave her alone and continue his walk, unsupervised, with Mary. Fanny cannot risk matching her strength to that of Mary, as she would then lose her special claim to Edmund’s attention, and therefore can only “think with pleasure of her cousin’s care” (112). As a result, Fanny has a vested interest in continuing her performance of delicacy in order to maintain Edmund’s attention.

Fanny’s performance of delicacy grants her special consideration from her cousin; however, Fanny’s family and suitors can also use her delicacy for their own particular ends. In Crawford’s courtship of Fanny, she attempts to manipulate her debility for her own ends, only to become a victim of both Sir Thomas’s and Crawford’s willingness to exploit her debility. After dancing with Edmund at the ball, Fanny notes “her inclination and strength for more [dances] were pretty well at an end” (324); however, once again Fanny does not make any statement about her exhaustion. Instead, exhaustion is read on her body by Sir Thomas, who “having seen her rather walk than dance down the shortening set, breathless and with her hand at her side” (324) declares Fanny incapable of continuing to dance. This proclamation does not bother Fanny initially, as she has no desire to dance with Crawford, and therefore willingly follows her uncle’s commands. However, Crawford is able to take advantage of Fanny’s circumstances as he sits beside her and insinuates himself into William’s breakfast and travel plans (325). Likewise, Sir Thomas uses Fanny’s debility as pretext for his potential matchmaking. Following Fanny’s exit,

the narration shifts to free indirect speech and gives the reader a few possible reasons for Sir Thomas's behaviour: "In thus sending her away, Sir Thomas perhaps might not be thinking merely of her health. It might occur to him, that Mr. Crawford had been sitting by her long enough, or he might mean to recommend her as a wife by shewing her persuadableness" (326). Once again, Fanny is not in control of how her body's performance is interpreted and used, indicating the slippery nature of a bodily performance of sensibility.

Fanny's debility becomes even more important during Crawford's visit to Portsmouth, as his constant attention to her health nearly persuades Fanny of his reformation. As at Mansfield Park, Crawford takes advantage of Fanny's weakened state in Portsmouth in order to sit close to her (468) and to give her his arm (474), but with increasing compliance from steadily worsening Fanny. During her final meeting with Crawford in Portsmouth, Fanny is unable to speak following Crawford's insistence in trusting him to safeguard her health, a role previously filled by Edmund: "Fanny thanked him again, but was affected and distressed to a degree that made it impossible for her to say much, or even to be certain of what she ought to say" (477). Once again, Fanny's performance of sensibility through her debility renders her silent and forces her body to be eloquent, as Crawford notes her tiredness and poor health. Immediately following this interview Fanny describes herself as "out of spirits" (479), "being low" (479), and suffering "dejection" (479). She acknowledges that her dejection is further complicated by her "feelings so near akin to envy" (479) for Edmund and Mary that "made her hate herself for having them" (479). Her inability to articulate her desires, coupled with her worsening health and mental dejection make her particular brand of sensibility ambiguous. Unlike Marianne's performance of sensibility, which is successfully read by her audience, Fanny's performance results in a frustrated misreading. Furthermore, Fanny's constant debility risks permanent stigmatization as

an invalid. However, because Fanny's debility is linked strongly to her sensibility, she avoids the stigmatization of disability and subsequent exclusion from the marriage market.

While Fanny does not regularly describe herself to her audience using the language of sensibility, her external and internal performances signal her membership in the Culture of Sensibility. Nachumi points out that Austen "frames Fanny's emotions as theatre. Fanny may define herself as a spectator, but the narrative insists that Fanny's interior conflict is as much of a spectacle as the scene it observes" (169). The most overt use of the language of sensibility to exhibit theatrical inner monologues occurs when Fanny learns that her cousin Maria has run off with Crawford: "Fanny seemed to herself never to have been shocked before. There was no possibility of rest. The evening passed, without a pause of misery, the night was totally sleepless. She passed only from feelings of sickness to shudderings of horror; and from hot fits of fever to cold" (510-511). This strong bodily reaction to mental duress is not without precedence. After being misused by both her aunts, largely because Edmund was not present to defend her against overexertion, Fanny develops a headache. After realizing his error, Edmund upbraids his mother and aunt, and fixes his attention on Fanny. In turn, her response to Edmund's attention is laden with the language of sensibility. When presented with a glass of Madeira by Edmund, Fanny "wished to be able to decline it; but the tears which a variety of feelings created, made it easier to swallow than to speak" (86). Her body, which gives the unmistakable appearance of suffering from a headache, compliments a mind overcome by mental excitement. Afterwards, Fanny admits that "the state of her spirits had probably had its share in her indisposition; for she had been feeling neglected, and been struggling against discontent and envy for some days past" (87). In fact, the narrator states that "as she leant on the sofa... the pain of her mind had been much beyond that in her head; and the sudden change which

Edmund's kindness had then occasioned, made her hardly know how to support herself" (87). Fanny is content to keep her inner struggles to herself, and to allow Edmund and the rest of her family to believe the source of her indisposition solely from her general weakness; however, this performance also indicates Fanny's ability to dissemble. Jenny Davidson argues that Fanny's ability to dissemble is frequently conflated with hypocrisy by her audience: "Fanny has the body of a sentimental heroine, after all, and her tears, blushes and so on are often misread as hypocritical, physical symptoms that are only apparently involuntary but actually under the control of an individual who manipulates them for her own advantage" (155). As readers, however, we can read her headache as the effect of Fanny's powerful sensibility, rather than as the result of too much time in the sun. Through the disabling effect of Fanny's mental anguish, the novel illustrates the close connection between sensibility and disability.

Both Fanny and Juliet are outsiders attempting to navigate a social order above their presumed status; however, while Fanny attempts to integrate herself within her extended family at Mansfield Park, Juliet consciously constructs herself as other. Initially she creates her false identity in order to escape a forced marriage, but her assumed identity once in England relies on a similar performance of sensibility in order to assert her claim to social status. Her first appearance in the text is a performance as a dark-skinned, wounded servant, an identity she later abandons in favour of the anonymity of Ellis. Juliet's parentage is not revealed until late in the novel, which means that her sensibility is her only remaining claim to social status. Mrs. Ireton, among others, critiques Juliet's constant performance of anonymity. Essential to constructing Juliet's superior sensibility is the false sensibility of both Elinor and Mrs. Ireton; however, narrative tension remains as Juliet is just as theatrical as Elinor and Mrs. Ireton, even if her performance is widely accepted by others as more authentic.

When Juliet first appears in the text, she is in disguise and consciously performing as a dark-skinned servant, effectively hiding both her actual social status and ethnicity through the use of overt theatricality; however, Juliet has no control over how her audience interprets this performance of self. Because she meets her fellow English travellers in disguise, Juliet is justifiably criticized throughout the text for acting a part. Specifically, Mrs. Ireton accuses Juliet of being a fraud and declares “for I was all along sure she was an adventurer and an imposter; with her blacks, and her whites, and her double face!” (Burney, *The Wanderer* 251). Miss Bydel accuses Juliet of faking illness in order to avoid a rehearsal, upon which Mr. Giles misreads Juliet’s body in order to support Miss Bydel’s accusation of affectation: “Illness... with all those roses on her cheeks? No, no; she’s very well; as well as very pretty. But you should not tell stories, my dear: though I am heartily glad to see that there’s nothing the matter. But it’s a bad habit. Though it’s convenient enough, sometimes” (350). Miss Bydel’s misreading of Juliet’s body indicates the slipperiness of relying on the body to communicate an internal process. Lastly, Elinor repeatedly accuses Juliet of contriving to seduce Harleigh. This mystery is doubly so for the reader, who is unaware of Juliet’s true name until the beginning of the third volume. The effect of Juliet’s concealment from both the reader and the other characters is the clear impression that Juliet is, in fact, actively and consciously performing as someone other than who she really is. As Elinor tells Juliet, “you know how transcendently you act” (398) and that she knows “perfectly well her powers” (398) of performance. Mrs. Howel repeats this accusation, demanding of Juliet “what part is this that you are acting” (804). Anderson argues that Juliet’s survival relies on “strategic disguises, the domestic theatrical, and a ‘social acting’ contingent upon her denial of performativity for its efficacy” (443). Juliet’s assumed identity of Ellis is itself a performance, and risks undermining her claims to sensibility as a result of her established

ability to act. Compounded with her refusal to reveal her parentage or what led her to flee France, Juliet has no option but to appear as other than what she is, if only to survive long enough to be recognized and protected by her true family. Juliet's claim to authentic sensibility is her only recourse; therefore, it is vital that Juliet's sensibility appear as more authentic than all those around her. Her desire to remain hidden in England justifies her recourse to performance, but does not eliminate the textual tension regarding the nature of sensibility.

It is only when compared to the theatrical Elinor that Juliet's performance of sensibility appears slightly less contrived, and as such, Elinor functions as a foil for Juliet. For example, Elinor's second suicide attempt coincides with Juliet's fainting on-stage. Juliet is about to perform, however begrudgingly, when she realizes Elinor is present, in disguise. Described in the language of sensibility, Juliet is "shaken and dismayed, her voice refused to obey her; her eyes became dim; her tottering feet would no longer support her; her complexion wore the pallid hue of death, and she sunk motionless on the floor" (*The Wanderer* 358-9). Juliet is already on stage, surrounded by an expectant audience; however, this is not the performance they expected. This performance is read by her audience as an innate and unconscious eruption of sensibility and contrasts immediately with Elinor's performance of her staged suicide as well as Mrs. Maple's very brief attempt to fake a "sudden indisposition" in order to "escape the shame of witnessing" (360) Elinor's performance. Like Juliet, Elinor faints and is attended by Harleigh. The key difference is that Elinor's fainting, like her wound, is self-inflicted and the result of her growing madness. Neither Harleigh nor the audience has sympathy for Elinor's wishes to die, and as soon as she faints away, all agency over her own body is taken from her by Harleigh who orders the surgeon to save Elinor's life. Neither Juliet nor Elinor is in complete control of how the audience reads their bodies. While Juliet's performance is a success, in that there is no



obvious theatricality and she proves she is part of the culture of Sensibility, Elinor's performance is a failure, because she fails to conceal that she is, in fact, performing. Hodgson-Anderson argues

because the audience perceives her suffering as indisputably staged, Elinor's performance cannot be understood for what it is: 'a scene of humanity.' Burney's statement with its theatrical terminology acknowledges that real, human suffering can be staged – but also announces the audience's inability to credit this. (647)

This again reveals textual anxiety regarding daily performances by refusing to condemn Elinor outright or praise Juliet. Furthermore, unlike Juliet's performance, Elinor's attempted suicide does not tread the ambiguous line between sensibility and disability. Instead, Elinor's performance results in her being labelled as mad, as well as losing agency over her own body and decisions temporarily. Juliet's performance of sensibility exploits this ambiguity whereas Elinor's performance moves away from sensibility, through disability into madness.

The elaborate staging of Elinor's suicide attempts and Juliet's fainting blurs the line between public and private performances of sensibility and disability, which in turn mirrors the slippage between disability and sensibility. The difficulty in *The Wanderer* is that Juliet's performance is just as practiced as Elinor's, but because Juliet is more successful at concealing the theatricality and in performing intelligible signs, Juliet's sensibility is accepted as more natural. Both Juliet and Fanny engage with a conscious dissembling of self, but *Mansfield Park* uses Fanny's inner theatricality to further highlight the inherent artifice of these daily performances of sensibility and self. Conversely *The Wanderer* resists censuring Juliet, and instead points to Elinor's lack of concealment of theatricality as the primary difference between the two heroines.

## 1.5 Family Theatricals

Family theatricals feature in both Burney's *The Wanderer* and Austen's *Mansfield Park*, and these performances underscore the theatrical requirement of sensibility. In both *The Wanderer* and *Mansfield Park*, the play's family cast is rounded out by family friends and the entire production is viewed, or would have been viewed in *Mansfield Park*, by neighbouring families and friends. Furthermore, for those involved in the play itself, the family theatricals in Burney's and Austen's novels are opportunities to evade the social strictures of courtship and engage in acceptable performances that emphasize personal sensibility without being censured for affectation.

While attending the theatre and opera displays social standing and offers visible proof of Sensibility to a wide audience, in both Burney's and Austen's texts private family theatricals involve similar theatrical performances to prove social status. As with theatre and opera performances, what happens onstage is a secondary concern. In both Burney's and Austen's novels the family theatricals are all-consuming endeavours that inevitably fail to accomplish their ostensible ends, which is the successful staging of a play for invited guests. Just as many of the characters' performances are misinterpreted, or rather, their bodies are misread, these theatrical performances suffer a similar confused fate. Furthermore, the performances of the theatricals are affectations themselves, as the performance of the play serves primarily to further various courtships and intrigues. The scripted performances are a way for potential lovers to court outside the social sanctioning of modest behaviour. As such, these amateur actors use theatricals to prove their own sensibility by adopting a dramatic character through which they can express freely their romantic desires and intentions.

The plays themselves provide an alternate method of reading the texts. *Lovers Vows* in *Mansfield Park* and *The Provoked Husband* in *The Wanderer* illuminate aspects of the characters who perform them, as well as larger themes within the novel. Fanny's turn as Agatha, who spends the entirety of the play dying, echoes her own daily performance as the delicate, poor relation that is largely forgotten by her family and beloved Edmund. Similarly, Mary's eagerness to portray the disobedient daughter Amelia indicates her own desire to misbehave and willingness to engage in sexually-charged rehearsals with Edmund. Elinor believes her diverting role as the adulteress Lady Wronghead will endear her to Harleigh, but it is Juliet's portrayal of the "serious, penitent, and pathetic" Lady Townly which best showcases her ability to perform sensibility (*The Wanderer* 96). Furthermore, these performances serve to highlight the theatricality of daily performances, such as the necessary affectation of sensibility, or feigned dissimulation of romantic interest.

One possible rationale for the inclusion of the family theatricals in *Mansfield Park* is to allow for a study of each character's response to the theatre, which in turn indicates that character's level of moral judgment. Nachumi suggests that the inclusion of *Lovers' Vows* in *Mansfield Park* stems from Austen's interest "in the effect of the theatre on spectators' emotions" (152), and "with the exception of Fanny Price's, the manner in which the characters respond to the private theatricals at Mansfield Park serves as a lesson in how not to respond to a play" (162). The reactions to *Lovers' Vows* function as a gauge of morality for both the readers and characters. Furthermore, Nachumi argues that Austen's critique rests on the misconception of sensibility: "for [Austen], moral growth cannot stem from a spontaneous emotional response to fiction. Instead it must be arrived at through a self-conscious union of feeling and reason, a union she offers her readers by encouraging them to read with a divided perspective" (172). This

“self-conscious union of feeling and reason” (172) echoes Fanny’s studied and self-conscious response to her situation as a reluctant actress; however, this reading of how *Lovers Vows* functions within *Mansfield Park* glosses over the inherent theatricality of Fanny’s inner thoughts and the daily dissembling that proves Fanny to be a superior actress. Paula Byrne argues that while “Sir Thomas Bertram condemns the theatricals, Jane Austen does not” (176). Instead, the theatricals are integral to the plot, allowing for the flirtation between Henry Crawford and Maria Bertram, and Edmund and Mary. According to Byrne, the purpose of the inset play is not to gauge a character’s morality, but to further highlight the innate social performance of daily life at Mansfield Park.

The family theatricals provide another opportunity in *Mansfield Park* for both the reader and some of the characters to critique the daily performances of dissembling and courtship, thereby honing their own theatrical talents. Fanny’s reaction to the rehearsals displays how the nature of performance provides a glimpse into the characters of Maria and Edmund Bertram, Henry and Mary Crawford, and Fanny. After watching a rehearsal of the play, Fanny relates that

Henry Crawford acted well, and it was a pleasure to *her* to creep into the theatre, and attend the rehearsal of first act – in spite of the feelings it excited in some speeches for Maria. – Maria she also thought acted well – too well;... As far as she could judge, Mr. Crawford was considerably the best actor of all; he had more confidence than Edmund, more judgment than Tom, more talent and taste than Mr. Yates. – She did not like him as a man, but she must admit him to be the best actor, and on this point there were not many who differed with her. (*Mansfield Park* 193-4)

Fanny’s comment of how well, or “too well” that Maria performs as Agatha, specifically

referring to Agatha's speeches regarding her seduction by the Baron, does not necessarily indicate Maria's superior abilities as an actress. Rather, Fanny criticizes Maria's inability to adequately dissemble her interest in Crawford and perform disinterest by too blatantly allowing the play to speak for her. That Crawford is the best actor onstage is even less surprising considering his later rakish behaviour towards both Bertram sisters and Fanny. Later Fanny is sought out separately by both Mary and Edmund, and "was wanted only to prompt and observe them" (199) in their rehearsal of Anhalt's courtship of Amelia:

To prompt them must be enough for her; and it was sometimes *more* than enough; for she could not always pay attention to the book. In watching them she forgot herself; and agitated by the increasing spirit of Edmund's manner, had once closed the page and turned away exactly as he wanted help. It was imputed to very reasonable weariness, and she was thanked and pitied; but she deserved their pity, more than she hoped they would ever surmise. (199-200)

Mary, who "not very unwillingly" (199) agreed to rehearse this scene, and Edmund use the courtship passage to further their own romance, and Fanny's presence allows them to maintain the appearance of propriety. Fanny's reaction to their performance indicates that Edmund's own emotions concerning Mary feature prominently in his reading as Anhalt. Furthermore, Fanny's reaction also reveals her own superior acting ability as "her determination to disguise her affection for Edmund requires her to perform in a theatrical sense" (Nachumi 167). While Mary and Edmund are unable to dissemble their romantic feelings for each other, only Fanny succeeds through recourse to her already established bodily weakness. This allows for Edmund to misread Fanny's body. As with her observations of Crawford and Maria, Fanny is keenly aware of how *Lovers Vows* functions as a prosthesis to courtship. The performance of *Lovers' Vows* does

more, therefore, than allow readers to assess the characters' reactions to the play, as Nachumi suggests; the play serves to highlight the daily necessity of performance in order to maintain the illusion of disinterest and the veneer of modesty, and simultaneously proves that Fanny is the most gifted actress in Mansfield Park.

Theatrical performances in *Mansfield Park* exist beyond the rehearsals of *Lovers Vows*, as parts of the text read as a script, with described exits and entrances, movement cues, and other stage directions. One particularly theatrical scene is at Sotherton, where the iron gate in the gardens provides a convenient staging for Edmund and Mary, and Maria and Henry, all of whom are observed by Fanny, who sits on a bench and comprises the audience. As Byrne points out, even the dialogue of this scene is theatrical (113). I would add, however, that it is only through the mediation of Fanny that Edmund and Mary's and Maria and Henry's conversations are rendered theatrical, a fact which is unsurprising considering how theatrically Fanny frames her own thoughts. This mediation echoes that of Evelina who, in describing Lady Louisa, indicates a similar theatricality to the performance. Exhausted from walking, Fanny sits on a bench and observes the various interactions while only occasionally taking part. Her stationary presence mimics that of a theatrical audience, watching the various entrances and exits of the players. The text itself is relatively free of description, focusing instead on the conversation with only occasional indications of direction. For example, following Crawford's comment on being "the man of the world" (*Mansfield Park* 115), which can be read as a hint towards Crawford's libertine tendencies, the text records Maria's reaction: "This was followed by a short silence. Miss Bertram began again" (115). That Maria immediately mentions Crawford's possible interest in Julia, as during the carriage ride to Sotherton she observed that Crawford and Julia "were laughing the whole way" (115), indicates that Crawford's subtle hint of libertinism did not

escape her. The text offers no other commentary on the matter, only Maria's brief silence to allow Crawford's comment to linger a while longer on stage. While the narrator is clearly the dominant voice here, Austen's use of free indirect discourse does not allow the reader to divorce Fanny completely from the narrative descriptions and interjections. In fact, as the conversation between Henry and Maria takes an increasingly romantic tone, the narrator reminds the reader that Fanny is observing everything. Fanny's scandalized reaction to their conversation is countered by the more cynical voice of the narrator, yet there are points at which it is unclear whose voice marks the various movements and inflections. For example, after Maria mentions how Sotherton's grounds will never be as dear to her as now, by which the reader understands Henry's presence is the key factor in Maria's enjoyment, the stage direction has Maria moving towards the gate, followed closely by Henry. Maria states that she "cannot get out, as the starling said," implying that she is both trapped by the iron gate and by her engagement. This statement is directly followed by stage directions: "As she spoke, and it was with expression, she walked to the gate; he followed her" (116). Is this the detached yet moralizing voice of the narrator, or the voice of Fanny, the nearly silent observer? The fact that the narrator and Fanny are indistinguishable here reiterates Fanny's function as audience, paralleling the experience of the reader. Like Fanny, the reader observes the dissembling performance of Henry and Maria, who are conscious of the performance but strive for the appearance of authenticity in order to minimize the inevitable scandal. Neither Henry nor Maria openly admits that the discussion of the Sotherton grounds is only pretext for furthering their mutual seduction, but they must also ensure that Fanny is complicit in their cover story. The reader and Fanny are left to wonder what Henry and Maria talk about once they jump over the ha-ha and disappear along "a circuitous, and as it appeared to her, very unreasonable direction to the knoll" (116). The entire Sotherton

episode underscores the theatrical prowess of the Bertrams and Crawfords, as well as further establishing Fanny's superior ability to recognize and evaluate their dissembling performance, thereby reiterating Fanny's necessary familiarity with theatricality in these daily performances.

*The Wanderer* also features a malfunctioning and ill-fated family theatrical, the primary function of which is to reveal the necessary performativity of sensibility. Similar to Fanny, Juliet is also reluctant to take part in the family production of *The Provok'd Husband* as Lady Townly, albeit for different reasons. Juliet's concern is remaining safely anonymous in order to keep hidden from her French husband, as well as the fact that her own personal experience would colour her performance, which could in turn expose her to further social scrutiny. However, Juliet's lauded performance was never supposed to happen. The play was to feature Miss Arbe as Lady Townly and allow Elinor a chance to impress Harleigh by playing Lady Wronghead. When Miss Arbe refuses to continue with the play and Elinor suspects Miss Arbe of wanting to bring down the theatricals in ridicule, Juliet is forced onto the stage. Not only does Juliet's performance as Lady Townly distract attention from Elinor, thereby endangering (in Elinor's mind) her pursuit of Harleigh, but Juliet's representation of Lady Townly displays the degree to which Juliet's performance of sensibility is superior to that of Elinor.

The core difference between Elinor's and Juliet's performances of sensibility is the degree of affectation that is read by the audience. The audience's favourable reaction to Juliet's performance indicates that even on stage, the appearance of natural sensibility is more desirable than overt theatricality. Because Juliet applies a performance of sensibility to her role as Lady Townly, her performance appears more natural, although it was carefully studied:

she soon never spoke, looked, nor moved, but to excite pleasure, admiration, and applause, amounting to rapture. Whether this excellence were the result of



practice and instruction, or a sudden emanation of general genius, accidentally directed to a particular point, was disputed by the critics amongst the audience.

(*The Wanderer* 95)

And while the critics' comment that Juliet's "air of inquietude" (95) was owing to Lady Townly's situation and Juliet's modest discomfort at this, the reality of Juliet's practiced performance of sensibility cannot be overlooked. The narrator describes Juliet's performance in the final act using the same praise Evelina had given Garrick: "the state of her mind accorded with distress, and her fine speaking eyes, her softly touching voice, her dejected air, and penetrating countenance, made quicker passage to the feelings of her auditors, even than the words of the author" (96). Juliet's body communicates with a strength that cannot be equalled by words, or by Elinor, but it is communication that has been studied and practiced. As Anderson states, "the 'natural' quality of her performance manifests her primary choice of acting method" (440), which is similar to Garrick. While this method highlights Juliet's "feminine delicacy," as Anderson suggests (440) and strengthens her claim to the Culture of Sensibility, it is not a surprise that Juliet should be such a convincing actress. Juliet is successful, after all, at hiding her true identity until she chooses to finally reveal it to the reader, performing an adopted identity with a daily act of dissembling; however, because Juliet is successful at concealing the theatrical elements of her performance, the audience lauds her as an actress, while dismissing Elinor's affected theatricality.

While the family theatricals are a temporary triumph for Juliet, they are a failure for Elinor, who is unable to capitalize on the potential to perform socially recognized and accepted sensibility. Shortly following the end of the play, Juliet faints. Elinor, already annoyed that Harleigh had asked Juliet to dance (*The Wanderer* 97), "stood suspended, looking not at her, but

at Harleigh” (98). Because she is wholly obsessed with gaining Harleigh’s love, Elinor refuses to perform socially expected actions of concern for Juliet, as required by the Culture of Sensibility. Instead, she performs a demonstration of her own sensibility by focussing all her attention on Harleigh. But this demonstration, like Elinor’s performance as Lady Wronghead, fails to garner Harleigh’s attention and Elinor’s performance is rendered unintelligible once again. Instead, Harleigh recognizes Juliet as “an elegant lady of taste” (Bander 122), in spite of her various costumes and disguises, thereby revealing her superior ability to correctly perform intelligible bodily communication associated with Sensibility.

The performative aspect of sensibility, made apparent through these theatrical episodes, is inescapable in both Burney’s and Austen’s novels. In both *Mansfield Park* and *The Wanderer*, the family theatricals provide opportunities to further courtships, prove sensibility, and emphasize the presence of intelligible performances of Sensibility in everyday life. Burney’s use of the play works primarily as a plot device to further the love triangle between Juliet, Harleigh, and Elinor. While the theatrical episodes in both *Evelina* and *The Wanderer* heighten awareness of the performance of sensibility off the stage, Burney is not concerned with criticism of the play or acting as a suitable recreation. Conversely, *Lovers Vows* in *Mansfield Park* highlights the dangers of performance, as well as the dangers of inadequate dissembling, both on and off stage. The family theatrical at Mansfield Park and theatrical staging at Sotherton emphasize the presence of performance and theatricality in the characters’ daily lives. Beyond the strictly theatrical episodes in both Burney’s and Austen’s texts, the awareness of this necessary performance of disability subverts the concept of innate and natural sensibility.

## **1.6 Conclusion**

This chapter explores the necessity of performance to create the appearance of sensibility.

Specifically, these performances require a degree of theatricality also found on the eighteenth-century stage. In describing both Lady Louisa and Garrick in theatrical terms, although only Garrick appeared on the stage, *Evelina* reveals the necessary theatricality in the performance of Sensibility through disability. Both Burney and Austen use theatrical language to describe the actions of their characters when performing sensibility; however, a character finds herself judged by the narrator when the performance is inconsistent or overtly theatrical. In these cases, it is not the presence of illness but the affectation of disability that endangers a character's claim to the Culture of Sensibility; the requirement of disability for the visibility of Sensibility is never questioned. Furthermore, both Burney and Austen use family theatricals to further explore the degree to which performances occur in daily life, not simply on the stage.

## CHAPTER TWO

### **Resistant Heroines and Willing Convalescents: How Burney and Austen Engage with Social Construction and Complicity**

In both Burney's and Austen's novels, sensibility renders the body remarkable; however, certain characters' bodies are made visible because of a significant bodily difference that goes beyond the nervous quivering of performative sensibility. Within these bodily differences there is no overt claim of membership to the Culture of Sensibility. Instead, these bodily differences are the product of a society's social construction of disability, which in turn is influenced by the prevailing attitudes of Sensibility. The question becomes what is the benefit of accepting the social construction of disability? Because the Culture of Sensibility requires performances of pity and benevolence from able-bodied counterparts, the position of the invalid provides a degree of status; however, this status requires an acceptance of both bodily difference and the cultural connotations of particular illnesses, such as smallpox and gout. It is not enough to claim a particular infirmity, but one must be willing to accept the social ramifications, both positive and negative. When Burney uses bodily difference in her novels, the effect is different for her male and female characters. Her male characters are overwhelmingly afflicted by gout that, as Porter and Rousseau suggest, functions as "the emblem of an upper social class – the virtual insignia of a ruling patriarchy" (143). Curiously, Eugenia's bodily difference, who stands as the lone marked body among Burney's many heroines, is presented as a clear example of the social construction of disability, in stark contrast to the rather unsophisticated portrayals of male bodily difference. Austen's novels reveal a more cynical view of social construction as both male and female characters are complicit in their characterizations in return for favourable status within their communities. Austen does not rely on a sentimental reading of her permanently marked

heroines, as Burney provides for *Camilla*'s Eugenia, and instead attacks the fetishization of the disabled body by both the waning Culture of Sensibility and the burgeoning health industry. Just as Burney and Austen condemn the appropriation of disability to prove Sensibility, both authors' novels also condemn the appropriation of medical discourse for personal gain. While Burney's male characters feature a rather unimaginative representation of gout-afflicted males, Eugenia allows for an exploration of and resistance to the social construction of disability. In contrast, Austen's novels display cynicism towards characters who are complicit in the social construction of their disabilities. As such, both Burney and Austen challenge what the bodily difference of disability signifies within their novels.

The marked body has been a central feature of literature since long before Cervantes's Quixote first tilted at windmills. Over time this bodily difference has been adopted into use through relatively unsophisticated portrayals of characters with disabilities. The marked body can reflect an evil or corrupted interior, such as Shakespeare's Richard III; display inevitable and inescapable fate, such as Sophocles's Oedipus; or represent the angelic soul trapped inside a deformed body, such as Dickens's Tiny Tim. In each case, the marked body represents more than just the character, such as anxieties about the nature of good and evil, or divine intervention. And in each case, the disability defines the character. During the eighteenth century, the increased medicalization of disability meant that the body was no longer a marker of divine retribution, but this does not signify a liberation of marked bodies from novels, especially the sentimental novels in which characters with disabilities are objects of pity. As Dennis Todd points out,

[a]lthough the eighteenth century had freed itself from such superstitions that bodily deformity was a punishment from God, it had not freed itself from the

stereotype about what the ‘character’ of a human monster was, what shape his personality must take as a consequence of his misshapen body. (225)

While stock representations of the *invalide*, hypochondriac, and nervous sufferer are a departure from the less nuanced malevolence of Richard III or the divine marking of Oedipus’s foot, these marked bodies of eighteenth-century fiction still define the characters that inhabit them. Martha Stoddard Holmes argues that by the late-eighteenth and nineteenth centuries, such characters are inevitably linked to melodrama and tragedy: “If the disabling of a public or private figure invariably invokes the concept of tragedy, most narratives of disability – even or especially autobiographical ones, curiously enough – must also negotiate with an expectation of melodrama” (22). Particular to the eighteenth century, this melodrama is linked to the Culture of Sensibility. For example, the gradual disabling of Harley in Henry Mackenzie’s *Man of Feeling* unapologetically links disability and melodrama to the portrayal of sensibility. Harley’s sensibility renders him increasingly ill as he experiences more sentimental and melodramatic tragedy. While the reader can simply link Harley’s death to an overabundance of unregulated sensibility, and categorize the whole text as sentimental melodrama, this elides the fact that melodrama requires the slow disabling of Harley in order to make the effects of the tragedy visible. Harley’s disabled body is an effective shorthand for communicating a set of cultural preoccupations with the accepted bodily experience, emotional expression, and nervous sensibility.

Over the past two decades, disability theorists have begun to question the use and function of the disabled body in literature. Mitchell and Snyder have proposed the term “narrative prosthesis,” which describes how a disability functions as a “prosthetic contrivance upon which so many of our cultural and literary narratives rely” (51). Specifically, Mitchell and

Snyder argue that although “people with disabilities have been the object of representational treatments,... their function in literary discourse is primarily twofold: disability pervades literary narrative, first, as a stock feature of characterization and, second, as an opportunistic metaphorical device” (47). Mr. Woodhouse’s valetudinarianism is a source of comedy, but also reveals anxieties about chronic invalidism in Austen’s *Emma*. Being head of the family “first in consequence” (*Emma* 5) in Highbury requires Mr. Woodhouse to perform particular social duties, such as attending balls and dinners, but his obsessive preoccupation with his health forces him to abdicate all responsibility to his unmarried daughter. Rather than being the respected head of the community, Mr. Woodhouse is the victim of Frank Churchill’s jokes. In a reversal of the standard practice, Emma and her new husband Knightly must remain in her father’s home because of his inability to function on his own. Mr. Woodhouse’s hypochondria propels the plot forward and, simultaneously, represents the disruptive power of invalidism. But while Mitchell and Snyder maintain that such narratives “rarely take up disability as an experience of social or political dimensions” (48), it is clear from the description of Mr. Woodhouse that social construction plays a significant role in the portrayal of disability. Because he consciously affects the role of gout sufferer without the text making his diagnosis explicit, Mr. Woodhouse self-constructs his hypochondria in terms that are intelligible to his community. While both Burney’s and Austen’s narratives rely on the disabled body to function as a narrative prosthesis to propel the plot forward, these representations are complicated by contemporary cultural attitudes towards disability, and specifically towards particular illnesses which carry cultural baggage such as gout and smallpox, which reveal the presence of social construction.

The various colds and fevers that punctuate the plots of Burney’s and Austen’s novels have provided scholars with several avenues to explore the relationship of health, illness, and the

novel. Diane Harris argues that Burney uses Eugenia's deformity to explore the notion of a deformed body capable of creating its own textual body (155). While she does not apply the concept of social construction, Harris does argue that the family's linguistic silence surrounding Eugenia's deformity coupled with her masculine education results in Eugenia re-writing her body in text (162). A text does not require a physical body for speech, and "this elision of the body gives Eugenia the freedom to offer a textual interpretation of her person: through this text, she can ask people to view her physical self in a different way" (162). While Austen's novels do not contain a character so clearly marked as other as Eugenia, various scholars have remarked on Austen's use of illness as a plot device. Both Pamela Steele and J. R. Watson view Austen's illness metaphor as proof the author was interested in the various implications of ill health. Steele argues that Austen's illness metaphor allows for "legitimate illustrations of Austen's themes and logical applications of her philosophy" (152). This echoes Watson's argument that "health is able to illuminate character in a significant way" (334). For both these scholars, illness in Austen's novels functions as a narrative prosthesis. Wiltshire, who has completed the most comprehensive study of how Austen uses illness and the body in her novels, argues that "health is intimately related to enablement and fulfilment, ill-health to frustration, anger and defeat" ("Jane Austen" 134). He ignores, however, the possibility of social construction and the influence of Sensibility. By the time both Burney and Austen were writing, the Culture of Sensibility had changed the significance of some disabilities. Some forms of disability, especially those related to nervous disorders, were framed positively within the Culture of Sensibility, which in turn could be exploited in return for favourable social status. A slight feeling of nervous faintness after receiving unexpected news or disappointments, such as those attacks suffered repeatedly by Mrs. Bennet, signifies an insipidity to modern audiences;



however, during the late eighteenth century and Regency, such a claim of nervous faintness requires her family to both acknowledge her disability and revere her status within the Culture of Sensibility, or risk censure by that same community.

By the time Burney and Austen were writing, the concept of the social construction of bodily difference was established, even if contemporary authors and philosophers had not yet derived a term for it. In 1711 and 1712, *The Spectator*'s "Ugly Club" articles describe a fictitious group of people who describe themselves as ugly to the point of deformity. The first Ugly Club article indicates a shift from conceptualizing deformities as signs from God to social construction:

Since our persons are not of our own making, when they are such as appear defective or uncomely, it is, methinks, an honest and laudable fortitude to dare to be ugly; at least to keep our selves from being abashed with a consciousness of imperfections which we cannot help, and in which there is no guilt. (36).

Rather than assuming the person with a deformity has been marked for divine retribution, the article medicalizes the body without moral judgement. The fault for their feelings of shame lies with the "ordinary people, who are not accustomed to make very good remarks on any occasion" (36); however, if the subject of ridicule "can possess himself with such a chearfulness, women and children, who are at first frightened at him, will afterwards be as much pleased with him" (36). It is not the deformity itself that is the problem; rather, it is public's inability to look beyond a binary definition of ability. But once society becomes accustomed to the appearance of a particular deformity, the disability is normalized and demystified. "The Act of Deformity" (37) provides the governing rules for the Ugly Club. The first clause underlines the role of social construction in the creation of disability: "no person whatsoever shall be admitted without a

visible queerity in his aspect, or peculiar cast of countenance; of which the president and officers for the time being are to determine” (37). The members of the “ill-favoured fraternity” (37) decide which applicant is deformed enough to warrant entry into the Ugly Club. The specific criteria used by the president and officers are unwritten, perhaps indicating the elusive border between ability and disability, although a later article states that in the Cambridge Ugly Club to gain admittance, “it was every body’s business to speak for themselves” (66). The dual meaning of “body” is clear, as the responsibility for communicating deformity rests both with the physical body and the applicant’s own construction of their disability, just as the responsibility for recognizing deformity rests with the society of the ill-favoured Ugly Club. These articles point out the degree to which deformity is a construction of the social reaction to disability. The Ugly Club gives equal importance to “a prominent pair of shoulders” (36) as to Mrs. Touchwood’s missing front teeth and Mrs. Vizard’s pox-scarred face (38), indicating that deformity occurs across a broad spectrum, rather than in rare, exceptional circumstances. Physical difference only becomes deformity, therefore, within the social structure of the Ugly Club. Outside the Club, it is unclear if the public would deem a member’s bodily difference a deformity; however, it is ultimately the larger public that must collectively decide what constitutes deformity. These articles underscore the unstable ground of deformity that relies on a collective agreement of what “deformity” signifies. Much like the spectrum of disability, there is a point at which deformity becomes ordinary and renders the body unremarkable. By redefining deformity, the Ugly Club draws attention to the arbitrary definition of deformity.

In his *Theory of Moral Sentiments*, Adam Smith proposes that deformity and beauty rely on a society’s input, indicating the presence of social construction. According to Smith, “our first ideas of personal beauty and deformity, are drawn from the shape and appearance of others,

not from our own” (134). In turn, “if we had no connexion with society, we should be altogether indifferent about either” (135). Without the reactions and comparisons from those near us, it is impossible to understand to what degree an individual complies with or deviates from the norm. Furthermore, Smith is aware that different societies necessarily have differing conceptions of beauty and deformity, thereby denying any pretension to a universal ideal of either. Instead, Smith argues that the definitions of beauty and deformity rely entirely on the dominant society: “What different ideas are formed in different nations concerning the beauty of the human shape and countenance? A fair complexion is a shocking deformity upon the coast of Guinea. Thick lips and a flat nose are a beauty” (232). Therefore, what constitutes deformity is entirely subjective and, according to Smith, the product of a societal average: “Monsters,... or what is perfectly deformed, are always most singular and odd, and have the least resemblance to the generality of that species to which they belong” (232). It is society that decides what is considered deformity, which also means that a society decides what constitutes disability. For Smith, disability is a perceived deviation from the standard norm of performance, although the exact degree of deviation remains unclear. Each society decides when bodily difference becomes deformity, signifying deviance in shape, and likewise when that deformity becomes a disabling condition, signifying deviance in ability. Like the Ugly Club half a century earlier, Smith cannot conclusively define what constitutes deformity nor when bodily difference becomes disability.

## **2.1 Social Construction in Burney’s *Camilla***

The sight of a pockmarked face was not rare in the eighteenth century; however, smallpox is a culturally loaded illness in the eighteenth century. David Shuttleton argues that smallpox is linked to a belief in the ability of a specific illness working “as a moral corrective”

(120). The early stages of smallpox consist of “the facial redness symptomatic of invited visual associations with blushing, signifying a lack of innocence or the hectic warmth of strong passions” (120). Burney’s use of smallpox, however, does not bear the implications of Eugenia’s loss of virginity or lack of modesty. Shuttleton reads Eugenia’s smallpox and subsequent disfigurement as part of a frequently used illness narrative, similar to that found in Sarah Scott’s *Millennium Hall* wherein illness leads to moral or intellectual enlightenment. As Felicity Nussbaum explains, “Scott insists on the pleasures of deformity that women find outside reproductive sex in creating their own definitions and imagined alternatives” (170). Rather than explore the implications of the illness narrative, Shuttleton portrays Eugenia’s smallpox and her love of reading as a simple case of cause and effect (135). Beyond Shuttleton’s observation of cause and effect, Eugenia’s smallpox and hunched back work as plot devices to differentiate between characters with authentic rather than affected sensibility. On the most basic level, her disability also functions as a narrative prosthesis as Eugenia is characterized as the epitome of female intellect because of the opportunities afforded her after her disabling accident and deforming illness. That her smallpox is used as a shorthand for her intellect is of secondary concern to the text, which focuses on how Eugenia and others construct her identity.

Eugenia’s experience of her own disability and deformity is the strongest example of disability as a social construction in the texts of Burney and Austen, although it is by no means the only example, as later discussion of *Persuasion*’s Mrs. Clay and *Pride and Prejudice*’s Miss de Bourgh will show. Because Eugenia’s family does not discuss her deformity, although they are aware of it, within her limited circle of family and friends she is unaware of how she differs from her sisters, or of how the outside world regards this difference. It is only once Eugenia leaves her family home that she is subject to the ridicule of those “ordinary people, who are not

accustomed to make very good remarks on any occasion” (Addison and Steele 36) and is conscious of the negative stigma associated with her disability for the first time. The reader is strongly cautioned, however, against making the same assumptions as the “ordinary people” who ridicule Eugenia. Doctor Marchmont states ““Eugenia joins so much innocence with information, that the mind must itself be deformed that could dwell upon her personal defects, after conversing with her”” (*Camilla* 149). Attention should be focused on Eugenia’s mind rather than her body, thereby effectively divorcing her from the earlier eighteenth-century notion of the mind mirroring the body: “Neither disease nor accident had power over her mind; there, in its purest proportions, moral beauty preserved its first energy” (50-51). The narrator repeatedly cautions her readers from invoking an earlier characterization of disability as evidence of good or evil in favour of social construction.

Eugenia’s gradual acknowledgement of her disability comes after her disturbing encounters with both Dubster and the market women. Their reactions cause Eugenia to become conscious of the degree to which she deviates from her immediate society’s conception of beauty and ability. The reactions of the market women and suitors create Eugenia’s disability. Prior to these reactions, Eugenia has no qualms about appearing in public. When Edgar asks Camilla whether or not Eugenia will dance, Camilla states “O yes she would! her lameness is no impediment ; for she never thinks of it. We all learnt together at Cleves. Dancing gives her a little more exertion, and therefore a little more fatigue than other people, but that is all” (64). Eugenia’s disability, while recognized by Camilla and her family, does not result in Eugenia becoming self-conscious. Eugenia’s distraught reaction after the episode with the market women confirms her lack of awareness of the public perception of her disability. After hiding herself in her room following the double insults of both the market women and Dubster, Eugenia states

“the reproach of representing to me, that thousands resembled me! of assuring me I had nothing peculiar to myself, though I was so unlike all my family – of deluding me into utter ignorance of my unhappy defects, and then casting me, all unconscious and unprepared, into the wide world to hear them!” (293). Eugenia’s reaction to these unfamiliar and aggressive stares is sudden awareness of her bodily difference. Garland-Thomson describes the power of the stare as “manifesting the power relations between the subject positions of disabled and able-bodied” (57). Repeatedly bringing Eugenia forth as a foil for Indiana’s beauty (*Camilla* 663, 714) reinforces the power of staring and its ability to stigmatize its subject, although Eugenia remains “incapable of suspecting such a design” (714). However, it is the gaze of Clermont Lynmere, her prospective husband, which causes Eugenia to feel “for the first time, a sensation of shame for her lameness, which, hitherto, she had regularly borne with fortitude, when she had not forgotten from indifference” (566). Soon afterwards, Eugenia reflects that she “had never yet thought herself so plain and insignificant, and felt as if, even since the morning, the small-pox had renewed its ravages, and she had sunk into being shorter” (577). Eugenia’s shame comes externally from Lynmere’s gaze, a fact that underlines the social construction of her disability. While she is undeniably pock-mocked and lame, her family is “[a]ccustomed... to the face and form of Eugenia” (630), rendering her deformities unremarkable. It is only once Eugenia enters a new environment where impolite staring occurs that she becomes conscious of her disabilities and bodily difference.

Eugenia’s father attempts to reposition her self-imposed place on the spectrum of disability by taking her to see a beautiful, nameless, idiot girl. This is a curious slippage, as the woman who cares for the idiot girl may view her charge as the Tyrols view Eugenia (310). Mr. Tyrold defines a hierarchy of disability and deformity: “You have seen, here, the value of

intellects in viewing the horror of their loss; and you have witnessed, that beauty, without mind, is more dreadful than any deformity” (311). Mr. Tyrold’s description of the idiot girl reinforces the belief that physical disability is preferable to mental disability, but this categorization rests on the notion of disability as a spectrum. By shifting the stigmatizing gaze onto the idiot girl, Eugenia can reposition herself on the spectrum of disability; however, the repositioning exists only within Eugenia’s immediate family, and not necessarily within her larger society. Furthermore, this repositioning relies completely on the superiority of Eugenia’s intellect that remains largely unnoticed. Eugenia’s body renders her superior intellect invisible to the general public. Whereas Eugenia is valued and loved by those family members and friends who admire her intellect, the idiot girl can only ever be admired for her appearance.<sup>9</sup> Because of the idiot girl’s beauty, she passes – however briefly – as abled, albeit with the appearance of melancholy: “Eugenia, much struck, sadly, yet with earnestness, compelled herself to regard the object before her, who was young, fair, of a tall and striking figure, with features delicately regular” (308). It is only once the girl performs the recognized acts of madness and idiocy that her disability becomes apparent. Mr. Tyrold, Camilla, and Eugenia watch the young girl “flinging herself suddenly upon her face, threw her white arms over her head, and sobbed aloud with violence” (309). She is the exact opposite of Eugenia, in that Eugenia is incapable of passing as able-bodied. But whereas Eugenia’s body may shock, the performance of the girl’s body horrifies because she has no mind or intellect to govern herself.

Like Eugenia’s disability, the idiot girl’s mental disability is the social construction of Mr. Tyrold and his daughters. The text describes the idiot girl in objectifying terms, negating her humanity and refusing her a name. Because she lacks the ability to behave as a rational creature,

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<sup>9</sup> A discussion of the distinction between mental and physical disability continues in Chapter Four.

she is reduced to human machinery. As the sisters watch the girl, she “began turning round with a velocity that no machine could have exceeded” (309), an observation which effectively destroys the façade of statuesque beauty. When she speaks, “the slaver drivelled unrestrained from her mouth, rendering utterly disgusting a chin that a statuary might have wished to model” (309), and later makes “a noise that resembled nothing human” (310). For Eugenia and the narrator, a failure to perform within the bounds of normative social behaviour renders the idiot girl no different than a base human, albeit beautiful, curiosity to be scrutinized. She attempts the basic social graces by “coming eagerly forward, dropt several low courtesies, saying, at every fresh bend – ‘Good day! – Good day! – Good day!’” (309), but she is unable to maintain the social pretence when Mr. Tyrold “answered her by a bow” (309). Her perceived inability to reason, to complete basic social interactions, and to control her emotions leaves her more socially isolated than Eugenia with her various physical disabilities. She becomes, according to Eugenia, “this spectacle of human degradation” (311). But this description of the idiot girl’s mental disability is itself a social construction. Eugenia’s visceral reaction to the beautiful idiot girl’s mental disability reaffirms Mr. Tyrold’s sermon on the deceptive nature of physical appearance. Because she cannot act within the regulated bounds of societal behaviour, Eugenia and Camilla exclude her from it by physically recoiling from her (309). Only Mr. Tyrold attempts to communicate with the girl, but this gesture is tainted by the fact he brought his daughters solely to observe her. His comment “that beauty, without mind, is more dreadful than any deformity” (311) reaffirms this hierarchy of disability. By constructing mental disability as worse than physical disability and separate from the spectrum of disability, the text provides Eugenia an avenue to engage actively in her society by using her intellect.

Eugenia’s education also results in another socially-constructed disability. Lynmere’s



reaction to Eugenia underlines her further social disabling, stating “this learning is worse than her ugliness” (579). The gawkers in Southampton later reiterate this sentiment: “Some imagined her studies had stunted her growth; and all were convinced that her education had made her such a fright” (748). The deforming power of female education leaves Eugenia doubly disabled socially. Not only is her appearance considered an aberration, but so is her mind. Eugenia’s intelligence, the traditional consolation of smallpox, and her hunched back render her monstrous in both body and mind. Eugenia’s education, a consolation prize from her uncle to ease his guilt for her childhood disabling, renders her inadmissible to the marriage market. As Harris points out, “just as he was responsible for turning her into a physical monster through the accidents he occasioned, so is he responsible for turning her into a mental monster through the education he has given her” (160). While Eugenia’s intelligence functions as a narrative prosthesis, as well as the expected result of surviving smallpox, her intelligence becomes a problem only once it is socially constructed as one by Lynmere. Yet it is Eugenia’s education that provides her with the ability to reposition herself within her society.

Eugenia’s determination to write her memoir that discusses her physical disability is her attempt to redefine what her deformity signifies and thereby wrest narrative control over her representation. The lack of open discussion surrounding Eugenia’s deformity functions as a linguistic silence enforced by Sir Hugh. Harris argues “Sir Hugh regulates the spoken word, as though believing that bodily deformities do not truly exist if never voiced” (156). Instead of the linguistic silence surrounding her disability, Eugenia’s memoirs will speak directly to it. With her education and intelligence, Eugenia could write a text on a variety of subjects, not the least of which would be a philosophical treatise to which she alludes, but she instead decides to write a memoir that will necessarily display her body once more to the world. This time, however,

Eugenia attempts to exert control of what her body signifies to her readers. As Harris argues, the absence of her physical presence, aside from her portrait, “gives Eugenia the freedom to offer a textual interpretation of her person; through this text, she can ask people to view her physical self in a different way” (162). In other words, she takes linguistic management of how her body is read. In the address that follows her portrait, Eugenia denies the presence of vanity in how she views her deformities. Instead, Eugenia points to her treatment at the hands of others – and specifically men – as the sole cause of her feelings towards her deformity:

“impute not to native vanity the repining spirit with which I lament the loss of beauty; attribute not to the innate weakness of my sex, the concern I confess for my deformity... for the value you yourselves set upon external attractions, your own neglect has taught me to know; and the indifferency with which you consider all else, your own duplicity has instructed me to feel.” (*Camilla* 905)

While she does not use the term social construction, there can be no mistaking Eugenia understands that the ““lords of the creation, mighty men!”” (905) are instrumental in deciding the significance of her bodily difference. By presenting this argument in a book rather than in person Eugenia gives her face and mind equal weight. The closing lines of the novel challenge Eugenia’s memoirs by silencing discussion about her body once again. Farr states

Burney suggests that the male gaze is something that can be sidestepped, an idea which Eugenia’s autobiography roundly dismisses. And yet again, the novel is making a concerted effort to disassociate the mind from the body, with Eugenia’s voice and virtue overriding her various defects. (13)

Eugenia’s memoirs remain unwritten at the end of the novel and her body vacillates between her own control and that of her family and their determined silence. By using Eugenia’s situation to

explore the social construction of bodily difference, Burney's *Camilla* reveals anxiety considering who controls the illness narrative when a society attaches cultural meanings to disfiguring and disabling diseases like smallpox.

Both Burney and Austen explore how characters control, or attempt to control, the social construction of their disabilities; however Austen's characters are frequently complicit in this social construction, showing none of the resistance found in Burney's *Eugenia*. Instead, Austen's narrators are often critical of the mercenary stance adopted by characters eager to embrace the potential status benefits of disability within the Culture of Sensibility. Through *Persuasion*'s Mrs. Smith and Mrs. Clay and *Pride and Prejudice*'s Anne de Bourgh, Austen's narratives include a character's difficulty in controlling the cultural significance of his or her disability. *Eugenia*'s book is, like her continually evolving identity, in the process of becoming at the end of *Camilla*, and she articulates clearly her desire to challenge prevailing assumptions regarding bodily differences. In contrast, the narrative voice in Austen's novels, who takes umbrage with the appropriation of medical discourse by the Culture of Sensibility, ensures that the marked bodies are less successful in controlling how their societies understand what disability signifies. Mrs. Smith uses her disability to mask her own machinations, thereby manipulating the social construction of the thoughtful, repentant invalid. Rather than challenging the prevailing social construction of disability, Mrs. Smith embraces it fully and exploits her position for her own ends. Anne de Bourgh's disability is used as an attempt to portray her innate delicacy in order to provide both an exemption from social requirements and a means to attract a suitor.

## **2.2 Social Construction in Austen's *Persuasion* and *Pride and Prejudice***

*Persuasion* engages in a critique of the Culture of Sensibility through Mrs. Smith's

mercenary exploitation of the cultural associations surrounding the invalid. As Gloria Sybil Gross asserts, self-interest in her own financial ventures initially guides Mrs. Smith's advice concerning Mr. Elliot to Anne (194). Casting Mrs. Smith's actions in the most negative light, William Galperin argues she "is in the end a manipulative and mendacious person whose main goal is to regain her West Indian property, and the slaves that presumably go with it, even if that means encouraging Anne to marry someone – specifically Mr. Elliot – whom Mrs. Smith knows to be thoroughly ruthless" (232). What Gross explores, although Galperin does not, is how Mrs. Smith relies on the Culture of Sensibility to help her reach her goals. According to Gross, Austen uses Mrs. Smith to critique "how an elitist clientele buys into the latest rationales for failure and unhappiness, how trafficking in crude bodily disorders brought on by folly and self-abuse, they milk the whole trumped-up business for all it is worth" (190). Just as Mrs. Smith's position on the periphery of Bath society affords her the opportunity to help Anne, Anne's adherence to the Culture of Sensibility affords Mrs. Smith the opportunity to exploit the empathy due to invalids. Mrs. Smith's disability and subsequent reliance on Nurse Rooke enable her to gain useful intelligence. In other words, Mrs. Smith's willingness to engage in gossip is the effect of opportunities provided by her disability. Mrs. Smith's rheumatic legs are both a useful plot device and an easy explanation for her behaviour. The malevolence of Mrs. Smith is not grounded in a clear malicious intent, but in opportunity. She is not a caricature of evil like Shakespeare's Richard III, and a sympathetic reading portrays Mrs. Smith as Anne Elliot's kind and helpful confidante. Mrs. Smith's actions are not completely in compliance with social norms of the Culture of Sensibility as she does not aid Anne out of her own altruistic feelings or sentimental notions, and as such Mrs. Smith's behaviour reflects Austen's suspicions of the Culture of Sensibility and the affectation of sensibility.

The narrator and text display ambivalence towards Mrs. Smith's performance of invalidism, even though Anne does not. Mrs. Smith is in Bath because she is recovering from "a severe rheumatic fever, which finally settling in her legs, had made her for the present a cripple" (*Persuasion* 166). In coming to Bath for her health, she is "almost excluded from [the] society" (166) of those who come to Bath for courtship, society, and to drink the water. Anne, who has spent years caring for her occasionally ill sister, quickly categorizes Mrs. Smith as a model invalid, as "neither sickness nor sorrow seemed to have closed her heart or ruined her spirits" (167). Indeed, Mrs. Smith is also eager to present herself as an authority on true fortitude in the face of illness: "Here and there, human nature may be great in times of trial, but generally speaking it is its weakness and not its strength that appears in a sick chamber; it is selfishness and impatience rather than generosity and fortitude, that one hears of" (169). Taken literally, Mrs. Smith is speaking of her fellow-sufferers in Bath; however, her comments on selfishness and impatience have a self-reflexive quality in her subsequent behaviour towards Anne as they discuss the courtship of Mr. Elliot. Mrs. Smith is determined to adhere to the illness narrative expected by Anne as she speaks reflectively on her dissipated past: "we lived for enjoyment. I think differently now; time and sickness, and sorrow, have given me other notions" (218). These notions, which she claims as the product of her illness, are unchallenged in the final pages of the text. Because of her friendship with Anne, Mrs. Smith regains a portion of her income; however, the reader is assured that "she might have been absolutely rich and perfectly healthy, and yet be happy" (274). Mrs. Smith is rewarded for her sickroom reflections with improved health and fortune, an ending similar to that of Marianne Dashwood. There is no punishment from her immediate society for her attempt to take advantage of Anne; however, the narrator gives a subtle critique of how "Mrs. Smith's enjoyments were not spoiled by this improvement of

income, with some improvements of health, and the acquisition of such friends to be often with” (274). There is a glimmer of smug satisfaction here that the narrator is quick to reveal, even if Anne herself remains blissfully unaware.

Mrs. Smith exploits the social construction of invalidism by projecting adherence to the illness narrative; however, the narrative remains ambivalent about Mrs. Smith. Her behaviour as an invalid is morally ambiguous as she partakes in gossip and exploitation of her fellow invalids. Anne cannot directly challenge her gossiping and questionable motivations regarding Anne’s courtship. Mrs. Smith’s blunt practicality regarding the sale of her goods and her use of Nurse Rooke reveals an unvarnished pragmatism and willingness to exploit situations:

“[Nurse Rooke] has a large acquaintance, of course professionally, among those who can afford to buy, and she disposes of my merchandize. She always takes the right time for applying. Everybody’s heart is open, you know, when they have recently escaped from severe pain, or are recovering the blessing of health, and nurse Rooke thoroughly understands when to speak. She is a shrewd, intelligent, sensible woman.” (168)

Mrs. Smith’s willingness to use Nurse Rooke does not end with selling her knitted goods; Nurse Rooke’s gossip regarding the society from which Mrs. Smith is excluded from provides Mrs. Smith with profitable intelligence: “Call it gossip if you will; but when nurse Rooke has half an hour’s leisure to bestow on me, she is sure to having something to relate that is entertaining and profitable, something that makes one know one’s species better” (169). Mrs. Smith’s emphasis on profitability reveals her financial preoccupation, as well as her willingness to use Rooke and her fellow invalids for her own advantage. Mrs. Smith describes Rooke’s patient Mrs. Wallis as “a mere pretty, silly, expensive, fashionable woman, I believe – and of course will have nothing

to report but of lace and finery. – I mean to make my profit of Mrs. Wallis, however. She has plenty of money, and I intend she shall buy all the high-priced things I have in hand now” (170). By initially representing herself as adhering to the illness narrative, Mrs. Smith does not challenge the social construction of her disability. She is aware of what her society expects of her and attempts to act accordingly. This affectation, which is clear to the reader although Anne remains oblivious, effectively reveals the inherent power in performing the accepted narrative in order to make personal and financial gains.

Mrs. Smith’s duplicity towards Anne further reveals Austen’s suspicion of the Culture of Sensibility and its requirement of complicity in the social construction of invalidism. Mrs. Smith’s questionable adherence to her narrative of reformation through illness becomes increasingly obvious as she pressures Anne to marry Mr. Elliot. Fully aware of Mr. Elliot’s character flaws and previously rakish behaviour, Mrs. Smith’s hopes for her own personal fortune rest on her ability to convince Anne of the appropriateness of marrying Mr. Elliot. Mrs. Smith tells Anne “I want you to talk about me to Mr. Elliot. I want your interest with him. He can be of essential service to me,” and later adding that she plans to “build my own selfish schemes on Mr. Elliot’s good fortune” (211). It is only after Anne repeatedly assures Mrs. Smith that the misinformation relayed “through the short cut of a laundress and a waiter” (209) is false that Mrs. Smith finally reveals her knowledge concerning Mr. Elliot’s past behaviour. Although Anne does not hold Mrs. Smith responsible for promoting Anne’s marriage to Mr. Elliot, the text challenges Mrs. Smith’s self-representation as a reformed and repentant invalid:

[s]he had been hastily preparing to interest Anne’s feelings, as far as the observances due to Mr. Elliot’s character would allow, when Anne’s refutation of the supposed engagement changed the face of every thing, and while it took from

her the new-formed hope of succeeding in the object of her first anxiety, left her at least the comfort of telling the whole story her own way. (228)

It is clear that Mrs. Smith's first interest in Anne's affairs is securing her own future, even at the cost of Anne's happiness: "My heart bled for you, as I talked of happiness.... He was very unkind to his first wife. They were wretched together. But she was too ignorant and giddy for respect, and he had never loved her. I was willing to hope that you must fare better" (228). The refutation, or at the very least subversion, of the traditional illness narrative is clear. As Heydt-Stevenson points out, "once she discovers Anne will not marry Elliot, her arch cosmopolitanism rapidly shifts to a melodramatic declaration of his villainy as she, in a speech that sounds like a parody of sensibility's war against knavery, describes the man she said was 'suitable' for Anne" (188-189). Simply surviving an illness or living with rheumatic legs does not automatically result in self-sacrificing moral goodness. Rather than adhering strictly to social construction, Mrs. Smith manipulates the language of the thoughtful convalescent and her position as an invalid in an attempt to regain her lost fortune. Although unsuccessful in convincing Anne to marry Mr. Elliot, Mrs. Smith remains Anne's friend. While she does not share Eugenia's altruism, Mrs. Smith is keenly aware of the power of the invalid.

Mrs. Smith's status as a permanent invalid provides an exploration of the social construction of deformity and the importance of complicity. Unlike Burney's Eugenia, who is determined to challenge antiquated notions of the moral significance of deformity, Mrs. Smith's collusion in the social construction of her disability reveals how an invalid can exploit his or her position. Nor is Mrs. Smith alone in *Persuasion* in attempting to manipulate her status as a marked body; Mrs. Clay is desperate to be accepted by Sir Walter and does not challenge his social construction of her deformity. In being complicit in the social construction of their



disabilities, both Mrs. Smith and Mrs. Clay aim to parley their position as marked bodies into more favourable circumstances. *Persuasion*'s narrator, however, remains sceptical of both performances.

Austen's suspicion of social construction runs throughout *Persuasion*, including Mrs. Clay's freckle deformity. Just as in *The Spectator*'s Ugly Club nearly a century prior, the deformity of *Persuasion*'s Mrs. Clay is partially subjective and the result of the social construction of her beloved Sir Walter. Class-obsessed, Sir Elliot shuns any indication of outdoor labour, which Mrs. Clay's freckles represent (Todd and Blank 349). Because of Sir Walter's apparent hatred of freckles and Elizabeth's unquestioning acceptance of her father's beliefs and prejudices, Mrs. Clay's freckles, and thereby her association with the lower classes, are represented as a serious deformity in need of correction. The prescribed treatment of Gowland's Lotion is not without subtext. Careful contemporary readers of *Persuasion* would have been familiar with the use of Gowland's Lotion to remove evidence of venereal diseases, including syphilis (McAllister 106). Using Crook's evidence, McAllister contends that Sir Walter's knowing reference to Gowland's Lotion reveals "the general corruption of the well-born Elliot family" (106). Sir Elliot's reaction to Mrs. Clay's freckles can be read as a self-conscious projection of his own family's marked status. Taken alongside Mrs. Clay's lower class status, her deformities, labelled thus by Sir Walter, make it unlikely that he would ever marry her, much to Anne's relief. Elizabeth makes her father's views on Mrs. Clay's freckle deformity clear: "That tooth of her's! and those freckles! Freckles do not disgust me so very much as they do him: I have known a face not materially disfigured by a few, but he abominates them. You must have heard him notice Mrs. Clay's freckles" (*Persuasion* 37-38). Anne's reply here echoes Camilla's feelings regarding Eugenia's deformity: "There is hardly any personal

defect... which an agreeable manner might not gradually reconcile one to” (38). Elizabeth, however, rejects this favourable reading of deformity as something one becomes accustomed to and reiterates her father’s construction of Mrs. Clay’s “plain” features as being profoundly negative (38). Regardless of the concentration of Mrs. Clay’s freckles, Elizabeth and Sir Walter’s insistence upon freckles as a deformity serves as a prosthetic to reinforce their own affectations regarding their beauty (3). The language of disability is of double use here: first, to show how disability can be socially constructed, and second, to underscore Sir Walter’s inability to recognize his sense of “the Elliot self-importance” (39). As with Anne de Bourgh, Mrs. Clay’s deformity serves mainly to highlight the affectations of Sir Walter as sole arbiter of beauty, class, and status. Sir Walter’s reaction to Mrs. Clay’s deformity reveals Austen’s implicit, if not explicit, understanding of how social construction functions. Outside these specific communities, Mrs. Clay’s deformity ceases to exist, leaving the reader to question not only the fluidity of such labels, but also the larger implications of applying the label of disability in the first place.

### **2.3 The Performative Power of Gout and Male Hypochondria**

While social construction of male invalidism uses language similar to the construction of female invalidism, male invalidism serves a different function within Burney’s and Austen’s texts. The same concerns regarding malingering exist, but now these concerns are compounded with the male invalid’s abdication of patriarchal and familial responsibility. As male authority figures are the primary constructors of culture and designators of disability in both Burney’s and Austen’s texts, the abdication of their patriarchal responsibility results in inevitable chaos in the characters’ lives. Once these performances of male invalidism unravel, the female characters must respond within the bounds of sensibility and patriarchy. Because the power relationship is

unequal, female characters remain at the whims of these male guardians and potential suitors who have already lost social relevance but retain their patriarchal power. In both Burney's and Austen's texts, female invalidism attempts to influence courtship. By contrast, male invalidism explores the effects on patriarchy when a male character is permanently marked as an invalid because of gout or hypochondria; however, the cultural baggage associated with both gout and hypochondria complicates these portrayals of male invalidism.

Both Burney's and Austen's texts criticize the affectation of chronic physical ailments and the appropriation of medical discourse for personal gain signals an awareness of the cultural connotations of invalidism. *Sanditon*'s Arthur Parker uses the language of invalidism to evade his responsibility to find gainful employment, unlike his industrious elder brother. *Emma*'s Mr. Woodhouse is a hypochondriac, obsessed with his supposed ill health to the neglect of his responsibilities as a patriarch in his community. Only *Northanger Abbey*'s Mr. Allen escapes criticism, but this is because his gout functions as a narrative prosthesis in the novel. Burney uses gout to represent the power held by its upper class sufferers: *Camilla*'s Sir Hugh uses the excuse of his ill health to have his nieces leave their families and live with him, while *The Wanderer*'s Sir Jaspar uses his invalidism to manipulate Juliet. Underneath these portrayals lies the serious discussion of how manipulation of the health industry perpetuates invalidism.

Considering that both Burney and Austen had personal experience with the health industry,<sup>10</sup> the

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<sup>10</sup> Burney and Austen, like many in the eighteenth century, had personal knowledge of the state of contemporary medicine. Burney's letters outlining her husband's illness, in which she "represents herself as [a] heroic nurse" (Wiltshire 216). Her narrative of own mastectomy "Burney is not merely becoming one of the doctors, because she sees herself as a heroine, not just a patient" (Kaye 52) highlights her ability to narrate bodily experience as "knowing the body as subjective experience merges with a knowing of the body as objective nature" (Epstein 162). Furthermore, Burney's journals document her own mental health during her time as a lady in waiting, her encounters with the Mad King, George III (Darby 5), and her observations of his medical treatment (Crump 327-328). While Austen was not ill as often as Burney, saving the

subtle criticisms found within their texts cannot be considered a coincidence. Both Burney and Austen use the bodies of the malingering invalids to criticize the appropriation of medical discourse in the Regency's burgeoning health care industry while simultaneously criticizing the Culture of Sensibility's complicity in the fetishization of invalidism.

The figure of the male invalid is littered through the pages of eighteenth-century novels. In some cases, such as the ill-fated Tristram Shandy, the recognized illness of tuberculosis leads to invalidism. Harley, from *The Man of Feeling*, has no definable illness other than his heightened sensibility, which leads to his death. Smollett's Matthew Bramble in *The Expedition of Humphry Clinker* has gout and a propensity to translate mental pain into physical symptoms, and vice versa. In each case disordered and overactive sensibility is the underlying connection, thereby linking male invalidism to the Culture of Sensibility. And while each case examines overindulged or unruly sensibility as a serious health concern, the health industry is never far from scrutiny. Within Burney and Austen, the male invalid provides resistance to stifling patriarchy and simultaneously reveals anxieties regarding the affectation of disability. Like the female invalids, the presence of physical impairments is not necessary for the status of "invalid" to be conferred. These male characters rely on the medical discourse of physicians, apothecaries, and well-read sisters to legitimize the appearance of their various forms of invalidism. Bilger points out that female characters mock male characters in order to reclaim power: "comic male

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last few months of her life, she diligently chronicled the neighbourhood's colds, coughs, and pregnancies in her surviving letters. She also provided care for her mother and brother, although her compassion regarding her mother's many complaints does wane at points: "She would tell you herself that she has a very dreadful cold in her head at present; but I have not much compassion for colds in the head without fever or sore throat" (Austen *Letters* 28). Furthermore, Austen reveals her medical knowledge when discussing her brother Edward's suspected gout (*Letters* 48). Lastly, her time in Bath exposed her to a spa culture more interested in "appearance and consumerism" than curing illness (Wheeler 133) and that Austen "had little faith in the fashionable treatments offered there" (Steele 159).

characters in works by eighteenth-century female writers provided opportunities for women living in a sexist society to laugh at men” (82). This argument functions equally well when applied to male invalids, as “by mocking specimens of the ‘lords of creation,’ these women novelists attack the basis of patriarchal society and encourage in their readers a similar insouciance toward male supremacy” (83). Both Burney’s and Austen’s texts feature male characters mocked for their flawed and unconvincing performances of invalidism; however, Austen’s novels feature stronger criticism of a health industry that enables such affectation.

Burney freely afflicts her male invalids, *Camilla*’s Sir Hugh and *The Wanderer*’s Sir Jaspar, with gout. Both Sir Hugh and Sir Jaspar attempt to control how their gout is interpreted; however, only Sir Hugh is successful as Sir Jaspar’s performance is marred by outbursts which reveal his true character. While Burney’s gouty gentlemen do not challenge prevailing eighteenth-century ideas of gout, the active engagement of both characters with their diseases reveals an awareness of social construction. In *Camilla*, Sir Hugh’s particular variety of gout allows for its easy association with guilt. By the late eighteenth century, regular gout could be readily explained by “gross gluttony” (Porter and Rousseau 65) and a “sedentary indolent manner of life, full diet, especially of animal food, and the excessive use of weak or light acid wine and spirituous liquors” (Reece qtd. in Porter and Rousseau 137); however, Sir Hugh suffers from irregular, atonic gout, a form of the disease which remained elusive (Porter and Rousseau 137). As Porter and Rousseau explain,

‘Atonic’ gout – gout *contra* health – amounted to the weirdest of these subspecies: afflicting one organ, the stomach, its poison said to produce instant shaking, chills, hallucinations, wild phantasms, death. Fanny Burney’s males in *Camilla*, especially Jacob’s master, are afflicted with it, as are the coachmen of

her correspondence. Its metaphors are of loss: in appetite, digestion, equilibrium, sanity; its stasis that of virulent nausea, flatulency, eructations, abdominal swelling. (231)

Burney's description of Sir Hugh's gout indicates her familiarity with these potentially deadly symptoms: "The Baronet had passed a night of more pain than danger, the gout having been expelled from his stomach, though it had been threatening almost every other part" (*Camilla* 326). *Camilla* leaves no doubt as to the cause of Sir Hugh's attack of this mysterious subspecies of gout: guilt. After observing a dejected Eugenia returning from a party, he is "seized suddenly with a gout in his stomach" (325). After reviving slightly four days later, Sir Hugh states that "poor little Eugenia has nearly been the death of me" (327):

Sir Hugh said, that the sight of her [Eugenia], returning to Etherington, with nearly the same sadness as ever, had wounded him to the heart, by shewing him she would never recover; which had brought back upon him all his first contrition, about the smallpox, and the fall from the plank, and had caused his conscience to give him so many twitches, that it never let him rest a moment, till the gout seized upon his stomach, and almost took him off at once. (327)

For Sir Hugh, the connection between his guilt and stomach gout is irrefutable. The stomach gout functions as punishment, but not of gluttony or excess as with regular gout, but for his failure to protect Eugenia. In making this connection explicit to his bedside audience, Sir Hugh exerts a nominal amount of control over how his body and its gout are read.

Burney uses the social construction of regular gout as a signifier of excess and status in *The Wanderer*, inflicting the disease upon Juliet's would-be suitor Sir Jaspar. Sir Jaspar attempts to parlay his chronic invalidism into a social obligation from Juliet who, under the strictures of

the Culture of Sensibility, would herself be sanctioned for failure to attend to the whims of the poorly Sir Jaspar. Rich, immoderate, and accustomed to luxury, Sir Jaspar is the epitome of a gouty gentleman who is consumed and defined entirely by his illness. Arguably, Sir Jaspar's ever-present crutches are as much a character as he is and serve as a constant reminder of his disability and his power over Juliet, as well as her own inability to escape his romantic advances (*The Wanderer* 448). Rather than hearing footsteps, Juliet and the nursery maid hear "the well known sound of his crutches" (502). Sir Jaspar's crutches accidentally detain Juliet in a room when "entreating her to be seated, he dropt upon the easy chair, which had been prepared for Mrs. Ireton; and crossed his crutches, as if by accident, in a manner that prevented her from retreating" (502). Later, he accidentally strikes "his crutches through her gown" while attempting to free both himself and Juliet (547). While a necessary walking implement for Sir Jaspar, the crutches function as a restraint, holding Juliet in place and attempting to control her physical movements. Juliet is doubly restrained here, once by the crutches, and once by her fear of appearing insensible to Sir Jaspar's status as an invalid. Sir Jaspar's inability to control his immoderate body and his demands on Juliet result in forcing her into an embarrassing situation with Mrs. Ireton.

Sir Jaspar's malice towards his servants is a more straightforward use of narrative prosthesis as it allows a quick and easy explanation for his behaviour. Sir Jaspar's gout is a culturally loaded illness. The narrator's portrayal of Sir Jaspar's indulgent use of language and behaviour contrasts with his own construction of his illness as triggered by his poor nerves. Sir Jaspar's constant use of nervous language is part of his attempt to claim the individuality and uniqueness bestowed upon those with the patrician illness, to eschew the more negative connotations of the immoderation and excess associated with gout, and to present himself as an

eligible suitor. At one point, Sir Jaspar complains to Juliet how his nervous system interacts with his gout: “You don’t consider what an artillery my wanton sprites are bringing upon me! My poor gouty fingers are so mumbled and pinched, and tweaked, to hurry me to get at my purse, that I cannot catch hold of it for very tremour!” (636). His well-practised form of speech is full of self-indulgent and showy allusions to “sylphs” (503), “elves” (540), and “fairy friends” (546), among others. Sir Jaspar’s desire to frame his illness in a particular light clearly shows his awareness of the cultural implications of both gout and invalidism, and his careful construction of desire for his gout to be read as favourably as possible. Unlike Eugenia’s self-construction of her disability, Sir Jaspar’s self-construction is untenable because it is based on a false performance of self.

Sir Jaspar attempts to control how his illness is read through the use of fanciful language; however, his cruelty towards his servants exposes the artifice of his pretensions to the trope of the jovial sufferer of gout. At various points in the text, Sir Jaspar describes his “little friends... who are always at work, [and] have continually been tormenting me of late, with pinches and twitches” (503). These “little sylphs” (503) represent his nervous system inducing him to action “by seasonable twitches, in some vulnerable gouty part, to twirl me from the regions of hope and romance, to very sober real life” (506). By using the language of nerves, Sir Jaspar hopes to link his gout to a refined nervous Sensibility. This construction breaks down once his temper is revealed. Juliet has difficulty reconciling these two aspects of Sir Jaspar’s character: “And is this, thought Juliet, the man who bears a character of impatience and ill humour? this man, whose imagination is so playful, and whose desire to please can only be equalled by his desire to serve?” (503). Sir Jaspar’s tirade against the groom draws an implicit connection between his gout and his temper: “Angry, because vexed, with all around, he used as little moderation in his



wrath, as reason in his reproaches” (538). Sir Jaspar’s “little moderation” in mind is echoed in the social construction of his gout and is presented as an inextricable aspect of his personality separate from any claims to the Culture of Sensibility. There is no attempt to excuse Sir Jaspar’s temper by Juliet; instead, his temper is his assumed real character, while his behaviour as a jovial, charming suitor is, by implication, revealed as affected. While witnessing Sir Jaspar’s treatment of the groom, Juliet reflects “I could never have imagined, that the most trifling of accidents could, in a moment, destroy the whole harmony of his temper!” (538). His foremost thought concerns his own immediate needs, even when Sir Jaspar finally succeeds in temporarily winning Juliet away from Harleigh: “Not even the delight of thus victoriously carrying off a disputed prize, could immediately reconcile Sir Jaspar to the fear of even the smallest disorder in the economy of his medicines, anodynes, sweetmeats, and various whims; which, from long habits of self-indulgence, he now conceived to be necessities, not luxuries” (737). Although he has been pursuing Juliet relentlessly, Sir Jaspar’s creature comforts are of paramount importance. Sir Jaspar becomes the stock representation of the temperamental, immoderate gouty gentleman, whose self-confessed “infirmities, physical and moral” (540) disqualify him as a potential suitor.

The gout suffered by *Northanger Abbey*’s Mr. Allen reveals Austen’s reliance on the disease as a narrative prosthesis to provide an excuse for Catherine to visit Bath. Afflicted with a “gouty constitution,” Mr. Allen travels to Bath for his health (Austen, *Northanger Abbey* 9). While he drinks the mineral water in the Pump Room, any other treatments he might receive are never mentioned by the text. Indeed, Mr. Allen’s activities in Bath consist of playing cards (13) and discussing politics (68), neither of which are prescribed in contemporary gout treatises as curative. Unlike Burney’s gouty gentlemen, Mr. Allen does not display intemperance in his behaviour. For example, Mr. Allen takes his responsibility for Catherine seriously, advising her

on the impropriety of “young men and women driving about the country in open carriages” and “going to inns and public places together” (104). Unlike Sir Hugh, whose intemperate indulgence of his own whims endangers Eugenia’s life, Mr. Allen is a stabilizing effect on Catherine. His rational approach to Catherine’s more exuberant and naïve personality emanates from his belief that “young people do not like to be always thwarted,” and therefore he neither completely indulges nor forbids her social activities (105). Thorpe’s description of Mr. Allen derives from the social construction of gout found in medical treatises and Burney’s *Camilla*: “[Mr. Allen] seems a good kind of old fellow enough, and has lived very well in his time, I dare say; he is not gouty for nothing. Does he drink his bottle a-day now?” (60). Catherine’s response that “he is a very temperate man” (60) dispels the notion that Mr. Allen’s gout is the inevitable product of his intemperance when his behaviour indicates otherwise. His gouty disposition, when combined with his position as a landowner around Fullerton (9), does further signify his status, which is consistent with the social construction of gout; however, the text does not record Mr. Allen’s pain associated with an attack of gout and is silent concerning his symptoms and medical treatment. The narrator and the characters never accuse Mr. Allen of affecting his illness or exploiting his status. Instead, Mr. Allen’s gout functions solely as a narrative prosthesis that allows Catherine to accompany him and Mrs. Allen to Bath.

Like Burney’s gouty gentlemen, Austen’s hypochondriacal men fully accept the social construction of their illness; however, this acceptance does not prevent *Emma*’s Mr. Woodhouse or *Sanditon*’s Arthur Parker from attempting to exert limited control over how their bodies are read. Mr. Woodhouse has some of the benevolence of Sir Hugh and none of the malevolence of Sir Jaspar; instead, Mr. Woodhouse’s hypochondria reduces him to a comic figure. He is the family patriarch to be indulged, never questioned, in his whims. The veracity of his illness is

never questioned; that he is plagued by hypochondria is accepted as an indisputable fact. His every conversation inevitably finds its way to this familiar hobbyhorse. As Porter points out, hypochondria as a disease evolved throughout the eighteenth century, morphing from a “somatic abdominal disorder accompanied by a mystifying multiplicity of symptoms migrating around the body” to “non-specific pains, and their relations to the ever-fecund imagination. The hypochondriac mutated into the *malade imaginaire*” (*In Sickness* 197). Along with this mutation is a lessening of respect for the veracity of the hypochondriac’s symptoms; however, in a Culture of Sensibility that values a person’s ability to react empathetically to suffering, simply ignoring or dismissing a hypochondriac was enough to invite disapproval. John Knightly encounters this disapproval when he criticizes Mr. Woodhouse’s unwelcome advice following Isabella and Mr. Woodhouse’s lengthy conversation concerning seaside resorts and health (Austen, *Emma* 114). Mr. Woodhouse insists that sea air almost killed him (108) and that London air is the reason that “London is always in a sickly season. Nobody is healthy in London, nobody can be” (110). Such comments signal to his family that he will never leave the safety of Highbury to find a cure elsewhere. This also means that he will not explore other opinions, relying completely in Mr. Perry’s judgment. Furthermore, following successfully maneuvering off the topic of health by Emma, Mr. Woodhouse, after a “silent rumination” and “an interval of some minutes,” proclaims “I shall always be very sorry that you went to the sea this autumn, instead of coming here” (113). While couched in the language of spas, health, and Mr. Perry’s advice, Mr. Woodhouse’s chief complaint appears to be that he feels himself neglected by his eldest daughter, who had “been longer than usually absent from Surrey” this year (98). The effect of Mr. Woodhouse’s health lecture is an eruption of frustration and anger from John Knightly. The “sarcastic dryness” with which he criticizes Mr. Perry explicitly and Mr. Woodhouse implicitly suspends temporarily the

indulgence with which Mr. Woodhouse's invalidism expertise is usually treated (114). John Knightly's breach of etiquette reveals his frustration regarding his father-in-law's hypochondria and behaviour. Effectively, Mr. Woodhouse's affectation of ill health compromises his position as paternal head of the family. Furthermore, John Knightly's critique focuses on Mr. Woodhouse's appropriation of medical discourse to justify an increased frequency of visits from his daughter. Knightly demands of Mr. Perry "why does he make it any business of his, to wonder at what I do?", but he is also clearly addressing Mr. Woodhouse (114). Mr. Woodhouse is aware that he has "been attributing many of his own feelings and expressions" to Mr. Perry (115). Thus it is Mr. Woodhouse's authority, and not Mr. Perry's, that is under attack. The quick reactions of Mr. Woodhouse's daughters and Mr. Knightley highlight John Knightley's social transgression of openly disagreeing with Mr. Woodhouse. As Porter points out, "sickness exerts a power of its own, the power of helplessness. He who resents and rejects the claims of the sick exposes himself to disapproval and guilt" (*In Sickness* 188). Furthermore, physicians could not call someone like Mr. Woodhouse a hypochondriac "without in some measure insinuating that he is mad, or at least whimsical" (Buchan 561). As a result, Mr. Perry does not dispute Mr. Woodhouse's claim to continuing poor health. Although his family makes occasional comment, they cannot openly disagree with Mr. Woodhouse's assessment of his health.

In Austen's texts, the hypochondriac is, before all else, a figure of ridicule. Porter points to these invalids as "hypochondriacal buffoons, mouthing pseudo-medical jargon, [who] whine and wheeze their way through Georgian plays and prints" (*Bodies Politic* 160). Mr. Woodhouse's claims to hypochondria are echoed in *Sanditon*'s Arthur Parker. Mr. Woodhouse is described as "having been a valetudinarian all his life, without activity of body or mind"

(*Emma* 5), as well as being “a nervous man, easily depressed” (6). Similarly, Arthur’s food concerns mimic those of his sisters. It is not enough that Mr. Woodhouse follows a strict dietary plan; everyone within his sphere of influence must follow it as well. At the Westons’ wedding, he is obsessed with the unwholesome wedding cake:

His own stomach could bear nothing rich, and he could never believe other people to be different from himself. What was unwholesome to him, he regarded as unfit for any body; and he had, therefore, earnestly tried to dissuade them from having any wedding cake at all, and when that proved vain, as earnestly tried to prevent any body’s eating it. (17)

His food austerity even reaches to his own guests’ dinners, allowing Mrs. Bates only a soft-boiled egg because it “is not unwholesome” (24), while Miss Bates can have “a little bit of tart – a *very* little bit” (24), all while allowing himself only a “small basin of thin gruel” (24). Buchan observes that preoccupation with diet is a symptom of hypochondria:

It may not be improper to add, that from whatever source these disorders may spring, their principal seat seems to be in the alimentary canal, at least most of their symptoms arise from thence: as flatulence; indigestion; nausea and vomiting; the hysteric globe; cramps of the stomach, &c. All these shew a weak and relaxed state of the stomach and intestines; to which, if we add an overdegree of sensibility of the nervous system, we shall be able to account for most of the symptoms denominated *nervous*, *hysteric*, or *hypochondriac*. (Buchan 563)

However, unlike Arthur, Mr. Woodhouse truly believes the veracity of his own ill health and therefore follows Mr. Perry’s gastronomic instructions to the letter.

Mr. Woodhouse constructs his portrayal of hypochondria on his superior grasp of popular

medical literature; however, Frank Churchill undermines this polite fiction when arguing in favour of a dance at the Crown, and in doing so, temporarily exposes the artifice keeping Mr. Woodhouse's respectability in place. Mr. Woodhouse's concerns about a poorly ventilated hall echo those of Buchan in *Domestic Medicine* and is another case of Mr Woodhouse's unquestioning acceptance of medical authority. Mr. Woodhouse argues that dances can only lead to illness: "A room at an inn was always damp and dangerous; never properly aired, or fit to be inhabited... They would catch worse colds at the Crown than any where" (*Emma* 270). Frank Churchill, however, argues that because the rooms are larger at the Crown, "we shall have no occasion to open the windows at all – not once the whole evening, letting in cold air upon heated bodies, which (as you well know, sir) does the mischief" (271). Frank uses Buchan, who warns that fainting fits and swooning, the result of a "sudden transition from cold to heat" (Buchan 558), are common and dangerous in assemblies:

[s]uch fits however must be considered as a kind of temporary death; and, to the weak and delicate, they sometimes prove fatal. They ought therefore with the utmost care to be guarded against. The method of doing this is obvious. Let assembly rooms, and all other places of public resort, be large and well ventilated; and let the weak and delicate avoid such places, particularly in warm seasons.

(Buchan 559)

Both Frank and Mr. Woodhouse are conversant in popular medical literature. Frank uses this knowledge to ridicule Mr. Woodhouse, proving Frank's insensibility to Mr. Woodhouse's position within the community and his professed illness. As Grossman points out, "it is not just that Frank disrespects the cavils of Mr. Woodhouse but, worse, that he disrespects the serious business of etiquette that occupies every respectable person in Highbury" (149). After all,

Highbury's citizens have been complicit in enabling Mr. Woodhouse's hypochondria. Frank's use, or misuse, of popular medical opinion reveals how easily such opinions can be manipulated in order to allow a dance at the Crown. Frank's manipulation echoes Mr. Woodhouse's earlier appropriation of Mr. Perry's opinions regarding sea air and London fumes. Both men are guilty of attempting to use medical discourses for their own benefit.

The culmination of Austen's scepticism is found in her unfinished *Sanditon*, which explores the appropriation of medical discourse by invalids for personal gain. Hardly anyone in the health resort of Sanditon appears to be ill, save for Miss Lambe's "delicate health" (*Sanditon* 200), but nearly everyone is connected in the health industry. This lack of sick people in a location designed for restoring health is not unique to Sanditon; aside from the hidden Mrs. Smith, the Bath of *Persuasion* is not a place to go to get well but is instead a place to retrench, court, and be seen. A health resort is no longer a place for ministrations to the ill; instead, these resorts have become a place to indulge in the appearance of health preoccupations. In *Persuasion*'s Bath, illness functions as a part of sensibility and as background to courtship. In *Sanditon* illness is a means to earn a living. As Galperin states, Sanditon ranges "from ostentatious philosophy to excessive hypochondria and self-absorption" (242). The text criticizes the health care industry's willingness to exploit legitimate and illegitimate illnesses. For example, although Miss Lambe has a strict prescription she must follow, her caregiver Mrs. Griffiths augments Miss Lambe's regimen with "some tonic pills, which a cousin of her own had a property in" (*Sanditon* 203). Mrs. Griffiths has a financial interest not only in the selling of these tonic pills, but also in ensuring that Miss Lambe will continue to require them. It is therefore in her interest for Miss Lambe to remain perpetually both "sickly and rich" (203). Similarly, Diana Parker's homemade concoctions and medical advice serve the double purpose

of allowing her to attend to the various familial illnesses and to ensure that these illnesses are never cured. The narrator states that the Parker sisters had “some natural delicacy of constitution in fact, with an unfortunate turn for medicine, especially quack medicine, had given them an early tendency, at various times, to various disorders; - the rest of their suffering was from fancy, the love of distinction and the love of the wonderful” (194). There is social profitability in chronic illness for the Parker sisters, although it is not monetary. The carefully arranged “phials already at home on the mantelpiece” serve as set decoration for the performance of invalidism which allows them to replace domestic work or ministrations to the ill within Sanditon with the employment of studied invalidism. Although those near them, such as Mrs. Parker, believe that “they would be better, if they would leave themselves more alone” (165), the wide availability of tonics, medical treatises, and in short the whole of the health industry is complicit in their performance. Thus *Sanditon* serves as a critique of the health care industry and those who appropriate the language.

The Parkers’ monetary interest in the success of the Sanditon resort clouds their purported altruistic goals of providing medical treatments to the ill, thereby exposing the conflict between ill-health and the health care industry more directly than in *Emma*. The entire Parker family, save Sidney, is invested heavily in the health care industry both as users and suppliers. Mr. Parker has committed his family fortunes to Sanditon becoming a seaside health resort for “those regular, steady, private families of thorough gentility and character” (142). His sisters and younger brother, conversely, are involved in the other end of the health care industry: treatment. Although all three siblings actively pursue employment as invalids, it is Arthur’s refusal to take up his responsibility to help improve the family’s fortunes that falls under the harshest criticism. He relies on the medical knowledge of his perpetually ill, yet somehow still



remarkably active, sister Diana to concoct a medically based excuse as to why he cannot find gainful employment. Mr. Parker states that Arthur “is so delicate that he can engage in no profession” (162), stemming from a languid delicacy that Diana attributes to his liver (164). Yet the text makes it abundantly clear that Arthur has no problem with his appetite, headaches, or other illness. Mr. Parker states that Arthur’s illness is likely more imaginary than a reality:

“it *is* unfortunate for poor Arthur, that at his time of life he should be encouraged to give way to indisposition. It *is* bad; - it *is* bad that he should be fancying himself too sickly for any profession – and sit down at one and twenty, on the interest of his own little fortune, without any idea of attempting to improve it, or of engaging in any occupation that may be of use to himself or others.” (165)

Arthur’s investment in his ill health is his one professional pursuit, to the detriment of his own fortune and, possibly, that of his brother. Unspoken and stricken from the final manuscript is Mr. Parker’s concern that Arthur’s “idle and indolent” (*Later Manuscripts* 451) habits will be too costly, although Mr. Parker’s Sanditon is ideally suited to just this sort of client. Although this comment did not survive the initial writing process, the condemnation of Arthur’s invalidism is clear in the text.

Appropriation of medical language is fundamental to Arthur’s portrayal of chronic invalidism; however, his lack of a consistent performance reveals the artifice of his illness. In order to escape familial and financial responsibilities, Arthur relies on the vague and fashionable diagnosis of poor nerves: “*I am very nervous. – To say the truth – nerves are the worst part of my complaints in my opinion*” (195). These poor nerves allow Arthur to avoid even the most routine exercise of walking to his brother’s home, Trafalgar House: ““Not as to mere distance, but the hill is so steep! – Walking up that hill, in the middle of the day, would throw me into

such a perspiration! – You would see me all in a bath, by the time I got there! – I am very subject to perspiration, and there cannot be a surer sign of nervousness” (196). Following Arthur’s complete engrossment in the physical pleasures of eating and drinking, the narrator remarks that certainly, Mr. Arthur Parker’s enjoyments in invalidism were very different from his sisters’ – by no means so spiritualized... Charlotte could not but suspect him of adopting that line of life, principally for the indulgence of an indolent temper – and to be determined on having no disorders but such as called for warm rooms and good nourishment. (198)

For those invested in the effects and profitability of invalidism, Arthur’s performance is convincing. For those who are not personally invested in the health care industry, Arthur’s performance of invalidism is a transparent display of malingering indolence. Furthermore, as Galperin points out, “the prospects for genuine communication and social health are essentially nil” (243) as Arthur has no desire to abandon his obsessive medical discourse or his employment as an invalid.

Furthermore, Arthur’s self-treatment of his nervous condition is not consistent with contemporary prescriptions and regimens, thereby indicating his misuse of medical jargon to shirk responsibility and revealing the tension between medical knowledge and the increasingly unfashionable Culture of Sensibility. Because of the popularity of nerves as the cause of most illnesses during the eighteenth century, pamphlets concerning the nervous causes of illnesses were widely distributed. Beginning with Cheyne’s *The English Malady*, curing the nervous hypochondriac generally consisted of a restricted diet and moderate exercise. Cheyne warns against “a gross, full, high Diet for a poor, thin, low, valetudinary Creature” (viii), such as Arthur’s regime of wine and hot chocolate, and instead recommends his “total and strict Milk,

Seed and Vegetable Diet” (vii), in conjunction with proper medicines, as a cure for everything from gout to venereal disease, pulmonary tuberculosis to epilepsy, “and other higher and inconquerable hysterick and hypochondriack Disorders” (vii). Half a century later, Buchan agreed with Cheyne over the treatment of “persons afflicted with low spirits, wind, weak nerves, and other hypochondriacal affections” (Buchan 171), stating that these persons “generally find more benefit from the use of solid food and generous liquors, than from all the cordial and carminative medicines which can be administered to them” (171). According to Buchan, “the persons most liable to these disorders [hysteria and hypochondria] are, the lazy, the luxurious, the unfortunate, and the sedentary” (Buchan 564). Buchan only recommends Cheyne’s vegetarian diet for cases of melancholy (541) and further recommends that hysterics and hypochondriacs pursue “labour, simple food, and free air” (Buchan 563). This conventional treatment for Arthur’s weak nerves is the exercise he is keen to avoid: “Weak nerves are the constant companions of inactivity. Nothing but exercise and open air can brace and strengthen the nerves, or prevent the endless train of diseases which proceed from a relaxed state of these organs” (Buchan 102). Buchan addresses directly those patients, like Arthur, who have a distaste for a curative exercise: “The lazy, the indolent, and the luxurious, will despise this advice: but such are incurable, and deserve to suffer” (Buchan 564). Arthur expertly avoids adhering to such contemporary advice in favour of his sister’s prescriptions. Arthur’s manipulation of medical opinion allows him to construct the image of an invalid, and the power of the invalid forbids anyone to openly challenge his rights to claim such employment without risking personal censure for insensibility. Although Sensibility is in decline in the world outside Sanditon, within this limited community the power of the invalid with claims to illnesses related to the Culture of Sensibility remains unassailable.

The danger of the misuse of medical discourse and desire for membership within the Culture of Sensibility are made explicit in *Sanditon*, whereas these dangers fester just beneath the surface in *Persuasion*, *Pride and Prejudice*, and *Emma*. While his sisters are determined to maintain the familial claim of delicacy through their careful performance of invalidism, Arthur merely exploits the social construction supplied readily by Diana. Arthur's understanding that invalids struck down by non-specific illness are represented primarily as malingerers causes him to use hypochondria as a shield against such accusations. Arthur's narrative represents some of the problems inherent in the health industry; that is, it enables the malingerer to manipulate both social expectations of hypochondria and his own performance in order to evade his various responsibilities.

## **2.4 Conclusion**

Throughout both Burney's and Austen's novels, permanent illnesses are formed through social construction. In turn, some of these illnesses, such as smallpox, freckles, gout, and hypochondria are culturally loaded. While most of these invalids accept the social construction of their various illnesses, some characters still attempt to maintain a modicum of control over what their particular illness signifies. Eugenia's insistence on presenting herself to the world through a book that also contains her portrait is her attempt to reassert control over what her smallpox and hunched back signify. Conversely, Mrs. Clay's willing complicity in the social construction of her freckle deformity is part of her attempt to exchange correction for a favourable change in status. Similarly, Burney's gouty gentlemen reveal the late-eighteenth century's beliefs of the causes and cures of gout. Complicated by the Culture of Sensibility's influence, nervous language infuses Sir Jaspar's speech and simultaneously requires specific, empathetic behaviours from Juliet. These requirements by the Culture of Sensibility are present

in characters' reactions to the hypochondriacal Mr. Woodhouse and Arthur Parker. Alongside these obligations of politeness is a disconcerting interest in popular medical literature that allows the hypochondriac to manipulate a situation through recourse to a professional opinion. Austen's texts reveal greater scepticism than Burney's texts towards those willing to accept the social construction of invalid and use it for personal gain. This very acceptance of illness in exchange for a change in status permanently marks the marriage plots of these texts.

## CHAPTER THREE

### **Moral Disorder: Temporary Illness, Moral Reformations, and Courtship Narratives**

In addition to characters using disability to prove membership within the Culture of Sensibility and characters permanently marked by the social construction of disability, both Burney's and Austen's novels use temporary disability to correct improper behaviour, a correction which resolves in marriage for female characters. Unsurprisingly, the sickroom is the location for moral education; however, the sickroom is simultaneously the location of courtship. Such characters are only temporarily ill throughout the narrative, normally with a fever and return to physical health prior to the text's conclusion. Temporary disability marks these bodies, but they escape the social construction of permanent physical disability. Temporary disability is necessary for character growth and plot, not just to prove membership within the Culture of Sensibility; as such, temporary disability functions as a necessary and positive plot point. Both Burney's and Austen's narratives feature necessary moral correction of an untempered sensibility and lack of proper judgment, behaviours which have caused serious illness and subsequent recovery; however, Burney's narratives display less awareness of the performativity of the reformation narrative than those of Austen. Both Burney's and Austen's novels use illnesses to make mental conflicts visible on the body, thereby allowing a character to communicate sensibility without speech. In using the disabled body in this way, Burney and Austen normalize disability as a common feature of sensibility and reformation in the sentimental novel. While Burney's illness narratives draw a strong correlation between illness and moral reformation, narrative distance created by a critical narrator or character complicates Austen's narratives, resulting in illness narratives that reveal more about the observer than the invalid. Furthermore, male surveillance of female invalids further complicates these narratives,

as the communicative power of temporarily disabled bodies results in successful courtship. Illness narratives in Burney's and Austen's novels function as didactic tools to help govern morality within the courtship space; however, these narratives frequently deny a voice to the sufferer and rely on the body's own communicative power for both the furthering of the courtship narrative and successful moral reformation. In short, illness narratives in both Burney's and Austen's texts provide the locus for successful courtship and for a character's successful reintegration into society. There is a visible shift between Burney's and Austen's construction of illness narratives. While Burney allows the invalid limited control over the framing of the illness narrative, Austen's removal of that power to the narrator and observing characters exposes the artifice of performance required by sentimental illness narratives.

Illnesses in Burney's and Austen's novels occur primarily as a plot device: as an impetus to travel or to court, as a visible expression of sensibility to aid in courtship, or as a behavioural corrective. By the late eighteenth century, the blending of both sentimental and illness narratives led to reformation narratives. In these narratives, previously rebellious, over-indulgent or immoral characters find their sensibility and behaviour curtailed through a high fever or illness, followed by a long and thoughtful convalescence. Arabella, of Charlotte Lennox's *The Female Quixote*, is cured of her obsessive consumption of sentimental novels and poems by a near-fatal fever and a stern discussion with a clergyman (377). In Mary Hays's *Memoirs of Emma Courtney*, Emma claims that her uncontrolled sensibility leads to a "slow, remitting fever" (149), which results in her eventual reformation. This redemption is not limited to female characters, as Sir Walter Cleave's morality returns following his illness in Defoe's *Moll Flanders*, which occurs after he abandons his wife and fathers a child with Moll. Wandless argues, "the vivid representation of bodies, especially bodies in distress, could affect audiences more profoundly

than speeches, sermons, and harangues” (57). By exploiting the inclination of sensibility towards nervous illness, sentimental novels feature bodies that function as physical barometers of morality.

Sentimental novels from the latter half of the eighteenth century operate as didactic tools and frequently feature improper or immodest young heroines who, after a brief illness and convalescence, embrace a more sensible and moral behaviour. While various aspects of this complex relationship between didacticism, sensibility, courtship narratives, and temporary disability have been examined, scholars have yet to fully examine this relationship as a whole. Dwight Coder’s work on Elizabeth Inchbald’s texts attempts to bridge this gap: “What remains unexplored, however, is why the myriad advances in the field of disability studies has not been brought to bear on this discussion. Why, for instance, are instances of fainting, fatigue, blushing, weeping, headache, etc. typically read as novelistic conventions rather than impairments?” (364). Coder’s analysis focuses on how Inchbald uses disability to signify sensibility within her novels, but what of the temporary disabilities suffered by heroines in courtship literature? Similarly, both Mullan and Todd have discussed the reliance of sensibility on illness. Todd indicates that illness in sentimental narratives can provide a “redemptive death” (4). Mullan argues that in sentimental novels “the drama of an afflicted feminine sensibility is played out as a repertoire of recognizable symptoms” (219), namely of hysteria. Because of the shared vocabulary between sentimental novels and hypochondria and hysteria texts (230), “the sensibility which is a privilege and the sensibility which might manifest itself in the disorder of internal organs are not to be separated” (231). Poovey and Hemlow have both pointed to the didacticism found in female-authored sentimental novels. Poovey states “for the most part, women writers were scrupulous about fulfilling the office of educator, and, as a consequence, their novels often echo conduct



books almost verbatim, stressing self-control and self-denial to the exclusion of psychological complexity and attributing almost all initiative to the evil characters than to the heroines” (38). Hemlow further illustrates Burney’s use of conduct book constructs of female behaviour in her novels: “Madame d’Arblay was too great a novelist to present her heroines as flawless patterns, but Evelina, Camilla, and even Cecilia (who was nearly perfect in the beginning) were forced through the painful vicissitudes of love to correct their errors in conduct and to attain perfection in the courtesy-book virtues before they won husbands” (756). Seeber, Steele, and Mooneyham have each recognized Austen’s reliance on illness as an educational tool, furthering the didactic goal of both Burney and Austen. Mooneyham explores how language is the main educational tool at work in Austen’s texts: “the central conflict in each novel is between the hero and heroine; their moral, intellectual and linguistic opposition defines the progress of education and growth” (ix). Seeber argues that Marianne’s fever is “a violent education” (225) designed to move her from “a heroine of sensibility” (225) to “a member of the community of sense” (225). Steele asserts that “Marianne’s new wisdom is a legacy of her fever, one of many instances of Austen’s view of severe illness as a way to moral enlightenment” (156). As such, illness functions as punishment in Austen’s texts: “Coughs and colds, sprained ankles and bumped heads, no less than obstinacy, selfishness, and wilful folly, are all as familiar to us as they were to her” (160). Sickroom confessions and reformations emerge as a feature of these novels. While Burney’s and Austen’s texts have been examined in terms of their use of language of sensibility, didacticism, and illness narratives, disability functions as a common thread throughout that remains unexamined.

### **3.1 Feverish Heroines and Reformed Harlots**

It is not enough to narrate fevers and reformations as these transformations must be

observed and accepted by other characters within the narrative. In observing the invalid, the narrator, other characters, and the invalid each attaches meaning to the suffering. Ward discusses the role of eighteenth-century physicians, and specifically Manningham, in observing their fevered patients, and how sentimental writers repurposed this medicalized speech found in medical pamphlets on fevers, which established “a framework for reading the female body under the doctor’s scrutiny” (98). More specifically, Ward points out that Manningham’s influential fever treatise “grants the physician authority over the diseased body [and] renders the patient complicit in the construction of a body that *needs* constant surveillance” (101). By extension, the observer must interpret and understand the signs and symptoms of the body. Evidence of this physician-patient relationship is present in both Burney’s and Austen’s illness narratives. The characters and narrators believe these illnesses signify particular moral failings, the grief and shock of which affects their respective bodies through sensibility. Ward argues that “the shared sentimental discourse of mid-century novels and fever literature” (114) indicates a common concern of the performative nature of both illness and sentiment:

For even as these texts sought to relieve anxieties about female sexuality by constructing a passive female body and providing the framework for reading, the need to establish an authoritative reader – whether the medical practitioner or the sentimental heroine – reveals an acute paradox. So long as the potential for deception – whether by biological disease or human agency – exists, so the need for intense scrutiny of the potential victim and its concomitant objectification remains. (114)

Specifically, the flushed cheek of the feverish heroine replaces the communicative power of the blush of the modest female and allows other characters, especially potential suitors, to view her

body while absolving the heroine of any responsibility for her increased sexual availability. Like the paradoxical message of the blush, which signals modesty while simultaneously signalling a degree of sexual knowledge, the fevered flush allows for nearly unmitigated access and permission to stare at the heroine's body without compromising her feminine propriety. Fever narratives allow for the display of female sexuality, thereby avoiding the tension between female propriety and desire.

As a plot device, poor morality resulting in illness functions effectively as a shorthand to reinforce eighteenth-century concepts of morality. The temporary invalidism suffered by Burney's and Austen's characters results from questionable behaviour usually consisting of an overindulgent and affected performance of sensibility that requires correction. Burney's novels accept a character's moral reformation resulting from the crucible of serious illness, but Austen's novels are more interested in who creates the narrative and what they decide the illness signifies. Moral education still occurs, but at a narrative distance. The temporary invalidism of these characters functions as inset morality tales and, for Burney, fevers provide the overly sensible heroines an opportunity to exhibit their sexuality without the risk of societal censure. In Austen's texts, these temporary illnesses reveal more about how the narrator and main heroine envision the illness narrative than how the invalid experiences his or her temporary disability, as in Burney's texts; furthermore, Austen displays an awareness of the artifice of the illness narrative that is absent in Burney's texts. The effect of Austen's use of the narrator and main heroine to frame the illness narrative is an exposure of the performative aspects of temporary disability. As the plot effect of these reformations is almost always reintegration into the family unit as either reformed son or married daughter, Austen's scepticism hints towards the artifice of this contrived narrative conclusion.

In the courtship narratives, fevers allow the communication of emotions and desires beyond that of public or private declarations. Heroines, and the occasional hero, suffer fevers as a result of mental conflict that affects their sensibility. This conflict affects the body to the point of serious illness in which the character becomes progressively feverish while he or she indulges further in an affected performance of sensibility. The fever breaks, and the character returns to health, with the fever having communicated the character's unspeakable emotions. The rules of propriety are such that a heroine cannot declare openly her true feelings, or she risks exposure as an immodest woman and exclusion from the courtship narrative. The fever, which reflects this mental conflict, transmits this information to her beloved without her needing to verbalize her feelings. Burney's Camilla and Austen's Marianne actively pursue their fevers as physical proof of their deep sensibility. Wiltshire argues that the body is "the site in which cultural meanings are inscribed, and illness one of the main means by which the body participates in and is determined by culture" ("Jane Austen" 127). The result of these cultural inscriptions is that "specific disability or illness symptoms may soak up messages from the patient's life [and] be interpreted as the result of fault or responsibility, for example, or come to function as a metaphor for a life-failure or disaster" (127). The fevers suffered by both Burney's and Austen's characters reflect their conflicted sexual propriety; however, the cause of their illnesses lies solely in their affected performance of disability, not in the illness itself. Burney's narrative portrays the fever-cured sensibility of the eponymous Camilla as wholly legitimate; however, Austen's fever narrative in *Sense and Sensibility* remains suspicious of the veracity of Marianne's moral re-education. This difference reflects the narrators' suspicions regarding the performance of sensibility.

The narrator establishes the performative power of Camilla's sensibility and links it to

her health and her attachment to Edgar early in the novel. Unregulated sensibility is the source of Camilla's illness, a trait that endears her to friends and family but leaves her open to detractors such as Dr. Marchmont, who question the sincerity of her performance. After learning of Edgar's impending engagement to Indiana, Camilla's "sensations were now most painful: she grew pale, she became sick, and was obliged, in her turn, to lean upon Eugenia, who, affrighted to see her thus strangely disordered, besought her to go back to the chaise" (Burney, *Camilla* 191). The shock and disappointment affect Camilla's sensibility, causing her to nearly faint and thereby risk revealing her feelings for Edgar. Despite her bitter disappointment, Camilla attempts to dissemble by portraying an unaffected appearance to her immediate audience in order to conceal her attachment to Edgar. There are two immediate effects of this dissembling behaviour: Camilla proves her adherence to female propriety as espoused by conduct book literature and she displays her ability to affect a bodily performance. The narrator states that Camilla's realization of the strength of her attachment to Edgar "became soon a call upon her integrity, and her regret was succeeded by a summons upon propriety" (191). As the text unfolds Camilla faces greater difficulty in controlling her increasingly potent and unregulated sensibility and its effect on her physical health: "The ardour of her imagination, acted upon by every passing idea, shook her Judgment from its yet unsteady seat, and left her at the mercy of wayward Sensibility – that delicate, but irregular power, which now impels to all that is most disinterested in others, now forgets all mankind, to watch the pulsations of its own fancies" (680). Camilla is unaware of how her uncontrolled sensibility leads her astray from proper judgment and Edgar. Nor is Camilla aware of how easily she moves to a more affected performance of sensibility (679). Her conversations and dealings with Sir Sedley and Hal Westwyn, which Edgar perceives as proof of her coquetry and dissimulation, leave her open to

his criticism and rejection. In turn, Edgar mistakes Camilla's unrestrained sensibility and lack of judgment for disinterest, and ends his courtship of her.

Camilla's fever serves to reconnect her to her family and to make visible her mental distress at the loss of Edgar, but also has the result of restoring Camilla's proper judgment while simultaneously communicating her sexual conflict. Camilla's flight into illness occurs as she abandons her family and friends. Immediately after she arrives in the inn at Bagshot, Camilla takes ill with fatigue, nerves, and hunger (860); however, her mental anxiety has steadily increased throughout the novel beginning with her debt to the questionable Sir Sedley, and later with her abandonment by Edgar, and finally with her anxiety surrounding Eugenia's romance with the libertine, Bellamy. In her last letter to Lavinia, Camilla, who is "weak from inanition, confused from want of sleep, harassed with fatigue, and exhausted by perturbation" (862), mentions her hope of dying: "I am ill, - and earnestly I pray with an illness from which I may rise no more" (863). This is the culmination of her unregulated sensibility and her lack of judgment. Unlike her brief emotional outburst following the earlier revelation of Edgar's engagement to Indiana, Camilla can no longer maintain control of how her emotional state reflects on her body. Instead, she is openly hoping to die as the result of her emotional, mental, and physical distress. This is Camilla's lowest point. She attempts to avoid all rest and nourishment because she worries "her friend might find her too well" (866) and have cause to question her sensibility and judgment. By embracing this performance, "she was more ill than she had even herself suspected. She thought all rapidly advancing, and enthusiastically rejoiced" (867). This feverish death wish abruptly ends as Camilla believes her death is imminent. Suddenly, her judgment returns:

Conscience now suddenly took the reins from the hands of imagination, and a

mist was cleared away that hitherto, obscuring every duty by despondence, had hidden from her own perceptions the faulty basis of her desire. Conscience took the reins – and a mist was cleared away that had concealed from her view the cruelty of this egotism. (872)

Camilla's subjectivity shifts to incorporate her conscience, providing a critical rather than sentimental appraisal of her situation. Camilla's realization that she has nearly "self-murdered through wilful self-neglect" (873) reflects this sudden re-emergence of judgement and tempering of her sensibility. The fever functions to force Camilla to reflect on the decisions, poor judgment, and over-indulged sensibility that lead to her falling near-fatally ill at an inn in Bagshot. Edgar's appearance in Bagshot offers Camilla the opportunity to prove the depth of her sensibility and feelings for Edgar through her body's feverish and delirious state, thereby allowing her to maintain her status as a proper lady while simultaneously communicating her sexual desire.

Camilla's near-fatal illness opens the narrative space for this revelation and the communication of desire, while simultaneously providing a seamless reintegration back into her family, with all claims to propriety intact. Edgar's appearance at Camilla's bedside is a sexually potent moment framed by the appearance of propriety, and allows the two lovers to reveal finally their desires and emotions. Hiding behind the bed curtains and after days full of fever, Camilla is not properly dressed to receive visitors. Instead, she lies on her bed, nearly immobile and hidden from view. When Edgar enters under the guise of a clergyman to give her last rites (876), her propriety is not immediately compromised by his presence; however, Edgar is aware of the subterfuge and the potential impropriety of his actions. After Camilla realizes the clergyman is Edgar, her actions further indicate her mental distress and heightened sensibility:

Camilla had no utterance, yet could not resist this urgency, and gently through the opening of the curtain, put forth her feeble hand. He seemed affected to agony; he held it between each of his own, and while softly he uttered, “O ever—unchangeably generous Camilla!” she felt it moistened with his tears. Too weak for the new sensation this excited, she drew it away, and the violence of her emotion menacing an hysteric fit, Mrs. Marl came back to her, and wringing his hands as he looked around the room, he tore himself away. (877-878)

This intimate, unchaperoned moment between Edgar and Camilla allows for the physical expression of their desire for one another while allowing Camilla to maintain her status as a proper lady. The charged sexuality of the moment is clear, as Edgar holding her hand nearly overwhelms her body and mental state. Edgar is obviously conscious of the effect of his presence on Camilla, leaving and not returning to her presence. Thus Camilla’s emotional and physical response to his presence has the effect of conveying her affected state to Edgar without Camilla having to speak a word. At that moment lying in the bed, Camilla conveys both her sexual availability and her feminine propriety, preserving her status as a marriageable woman.

Following her illness and reconciliation with her family, Camilla is reproached by her mother for overindulging her sensibility to the point of near-fatal illness, yet the narrative remains mostly silent on Camilla’s affected performance resulting in the positive outcome of reuniting the two young lovers. After finding Camilla near death in the inn at Bagshot, Mrs. Tyrold tells her “it is time to conquer this impetuous sensibility, which already, in its effects, has nearly broken all our hearts” (882). The text has no more to say on the issue and takes Camilla’s reformation as obvious and complete. The narrator moralizes that “the elastic period of youth” is characterized with a necessary “epoch of extremes” that teaches “moderation, by which alone we



learn the true use of our blessings” (889). Alongside this new moderation, Camilla’s near miraculous restoration to health is also instantaneous, “from sorrow the most desolate, [she] bounded to joy that refused a solicitude; and from an illness that held her suspended between delirium and dissolution, to ease that had no complaint” (889). Her sensibility remains effusive, and the narrative ends quickly after her reconnection with Edgar and her family, so Camilla’s ability to regulate her sensibility following her temporary illness is untested and unclear. The temporary disability positively affects Camilla’s behaviour by forcing her to confront her lack of judgment and unregulated sensibility, and permanently changes her behaviour, thereby leaving her marked by her near-death experience. Furthermore, the text remains ambivalent towards Camilla’s affected performance, as her mother censures Camilla for her indulgent behaviour, but rejoices in the rewards.

This motif of unregulated sensibility also appears in Austen’s *Sense and Sensibility* through Marianne and her unrestrained expression of sensibility. Similar to Burney’s Camilla, Marianne portrays unregulated sensibility that results in misunderstandings, foiled affairs, a performance of invalidism, a near-fatal fever, and apparent moral education. But while Camilla learns to regulate her sensibility and employ proper judgment, based partially on Mrs. Tyrold’s frequent reminders for Camilla to control herself (*Camilla* 895), the narrative ends so quickly that it is difficult to evaluate if Camilla has truly reformed. Marianne, by comparison, claims to have reformed and learned to control her sensibility, but the narrative makes clear that Marianne’s sensibility remains as perilous as it was prior to her fever and re-education. Austen’s narrator remains significantly suspicious of characters professing such potent sensibility. Unlike Burney’s Camilla, who appears to adhere to the illness narrative of moral reformation, Marianne’s divergence from the narrative reveals the text’s suspicions regarding the

performativity of sensibility.

In refusing to regulate her sensibility, Marianne finds herself in various imprudent situations. Contrary to conduct book advice regarding the behaviour of unmarried young women, Marianne does not attempt to moderate her attentions to Willoughby when he first visits Barton Cottage. After being mildly censured by Elinor, Marianne mockingly states

“I have been too much at my ease, too happy, too frank. I have erred against every common-place notion of decorum; I have been open and sincere where I ought to have been reserved, spiritless, dull, and deceitful: - had I talked only of the weather and the roads, and had I spoken only once in ten minutes, this reproach would have been spared” (*Sense and Sensibility* 57).

Willoughby’s aversion to these “common-place notions” compounds her own initial disregard for convention:

When he was present she had no eyes for any one else. Every thing he did, was right. Every thing he said was clever. If their evenings at the park were concluded with cards, he cheated himself and all the rest of the party to get her a good hand. If dancing formed the amusement of the night, they were partners for half the time; and when obliged to separate for a couple of dances, were careful to stand together and scarcely spoke a word to any body else. Such conduct made them of course most exceedingly laughed at; but ridicule could not shame, and seemed hardly to provoke them. (64)

Both Marianne and Willoughby regard this behaviour as superior because of its apparent lack of affectation, as opposed to what they regard as the false manners and propriety in their immediate society, manners that Marianne regards as “reserved, spiritless, dull, and deceitful” (57). By

disregarding conduct book notions of courtship, Marianne and Willoughby argue that behaviour accepted as proper cannot be natural as it does not allow for the natural effusions of unregulated sensibility.

These initial private transgressions lead to more serious situations that have the potential to disgrace Marianne publicly and render her ineligible for the marriage market. Elinor overhears Willoughby address “her sister by her christian name alone” (70), which indicates “an intimacy so decided, a meaning so direct, as marked a perfect agreement between them. From that moment she doubted not of their being engaged to each other” (70). This episode is followed immediately by Margaret watching Willoughby cut off a lock of Marianne’s hair and corroborates Elinor’s belief that Willoughby and Marianne are engaged:

they were whispering and talking together as fast as could be, and he seemed to be begging something of her, and presently he took up her scissars and cut off a long lock of her hair, for it was all tumbled down her back; and he kissed it, and folded it up in a piece of white paper, and put it into his pocket-book. (71)

There is an unavoidable association with Alexander Pope’s *The Rape of the Lock* and its erotic connotations, although the reader is not given evidence of anything more intimate between Willoughby and Marianne. The fact that no engagement has ever taken place invites questioning of Marianne’s moral judgment. Even more grave is Marianne and Willoughby’s unchaperoned excursion to Allenham during the Delaford picnic. Elinor is immediately aware of the impropriety of visiting Allenham “while Mrs. Smith was there, and with no other companion than Mr. Willoughby” as the private excursion “has already exposed [Marianne] to some very impertinent remarks” regarding her conduct (80). Relying on her natural sensibility, Marianne argues “if there had been any real impropriety in what I did, I should have been sensible of it at

the time” (80). Marianne’s insistence on being guided by the physicality of her sensibility, rather than sensible judgment, means that she behaves completely inappropriately for the situation. More seriously, her lack of propriety leaves both her moral judgment and virtue in question, which has the potential to leave her and her sisters disgraced and unable to marry. As Colonel Brandon recognizes that Marianne has “the same warmth of heart, the same eagerness of fancy and spirits” (233) as his ill-fated Eliza, with these similar transgressions Marianne risks a similar fate. It is only through a serious illness brought on as a direct result of her indulgent sensibility and a long convalescence to reflect on past behaviour that Marianne avoids becoming another fallen woman, like Eliza.

As in *Camilla*, there are male witnesses to Marianne’s suffering and illness, transforming the sickroom into a space for courtship. While Colonel Brandon does not enter Marianne’s sickroom, he is present at Cleveland and provides Elinor with aid and support while maintaining his own vigil over Marianne. Although he is not her professed lover, Colonel Brandon is the only bachelor given regular access to the ill Marianne through Elinor’s reports on her status and reliance on him to deliver her mother to Cleveland. Willoughby, however, is barred from the sickroom. His sudden appearance at Cleveland indicates both his feelings for Marianne and the drawing power of the invalid in the sickroom, whose suffering results from the depth of her own frustrated desires playing upon her affected sensibility. While Marianne’s suffering provides proof of her sensibility, albeit initially affected, and love for Willoughby, the effect on Colonel Brandon is to heighten his affection for her. As with *Camilla*, Marianne’s tortured body reflects her frustrated sexual desires without articulation, thereby maintaining the veneer of propriety; however, unlike *Camilla*, whose mind remains untouched by sexual innuendo, Marianne’s mind and behaviour require a more strict moral reformation. While remaining absent from the

sickroom, Colonel Brandon's presence and aid during Marianne's illness prompts Elinor to reflect that "to *his* sufferings and *his* constancy far more than his rival's, the reward of her sister was due" (379). Both Elinor and Mrs. Dashwood hope to persuade Marianne to accept Colonel Brandon, whose worth has now been proven far above that of Willoughby's, but Elinor's belief that Colonel Brandon is due her sister based partially upon his actions in and around her sickroom at Cleveland indicates that the sickroom is an acceptable location for courtship.

Marianne Dashwood's performance of sensibility results in a very serious illness, which, while not performed in the affected sense of the term, contains its own reformation narrative. As Steele points out, "Marianne's new wisdom is a legacy of her fever, one of many instances of Austen's view of severe illness as a way to moral enlightenment" (156). Just as with Burney's Camilla, the fever serves as a behavioural corrective, forcing Marianne to contemplate her behaviour and how it directly led to her near-fatal illness; however, the closing pages of the text seem to indicate that this reformation is also a performance and Marianne's extreme tendencies are not truly at an end. Wandless argues that Marianne's illness functions to temper Marianne's behaviour: "Austen, through the depiction of Marianne, approaches sensibility as a habit to be outgrown. If it can never be fully put aside, it must finally be tempered by reflection and reason" (67). Marianne appears to adhere closely to the illness narrative as providing a reformation of character; she states "my illness has made me think – It has given me leisure and calmness for serious recollection.... My illness, I well know, had been entirely brought on by myself by such negligence of my own health, as I had felt even at the time to be wrong" (*Sense and Sensibility* 391). This echoes Camilla's own sentiments regarding her wilful self-destruction. As her own mother is incapable of delivering a lecture on judgement, such as that delivered by *Camilla's* Mrs. Tyrold, Marianne designs her own course of learning to improve her judgment. Upon

hearing Marianne's plan to educate herself with books from Barton Park, "Elinor honoured her for a plan which originated so nobly as this; though smiling to see the same eager fancy which had been leading her to the extreme of languid indolence and selfish repining, now at work in introducing excess into a scheme of such rational employment and virtuous self-controul" (389). Elinor recognizes that Marianne's tendency to immerse herself is not fundamentally altered, although the object of her plans has changed; however, the reader cannot escape the impression that Marianne's ability to indulge in sensibility was not truly cured, but rather tempered by reflection and judgment, brought on by her fever and convalescence. This observation is reinforced by Marianne's reaction to shocking news during her recovery at Barton Cottage. Following the mistaken announcement of Edward Ferrars's marriage, "Marianne gave a violent start, fixed her eyes upon Elinor, saw her turning pale, and fell back in her chair in hysterics" (400). Later, when Elinor relays the news that Edward is not married, "Marianne could speak *her* happiness only by tears.... Her joy, though sincere as her love for her sister, was of a kind to give her neither spirits nor language" (411). Marianne's sensibility, while not nearly as vocal or effusively sentimental as previously, remains unchanged. Rendered speechless by emotion, Marianne's sensibility clearly remains as potent as ever; however, she is learning to temper her physical vulnerability with judgment.

While the narrator maintains that Marianne has conquered her previous prejudices and taken a more rational approach to life, the narrator also states that Marianne "could never love by halves" (430), which implies that Marianne's reformation and use of the illness narrative has been a performance. Seeber argues "that Marianne's behaviour is constructed... is only half the story" (229) as it highlights the self-construction of Elinor's own behaviour and the bias of her own observations: "the overtly dramatic Marianne is the key to the text's exposure of individual

language as always already an acting out of an ideologically constituted language” (229). Elinor and the narrator are suspicious of Marianne’s transformation, as evidenced by their sceptical descriptions of Marianne’s convalescing behaviour and plans for improvement. Like Camilla, Marianne hopes that her “feelings shall be governed and [her] temper improved” (*Sense and Sensibility* 393), rather than relying solely on sensibility, but that this approach must be learned and practiced indicates the inherent performativity in Marianne’s behaviour. During Elinor’s recitation of her meeting with Willoughby, Elinor closely watches Marianne’s reaction and approves of “a solitude so reasonable as what [Marianne] now sought” (394). In Elinor’s eyes, at least, Marianne’s response indicates a moral reformation; however, the effect of this suspicion is Marianne’s possible subversion of the traditional illness narrative by a failure to perform the actions of a repentant convalescent. By directly exposing the behavioural expectations of the convalescent and repentant sentimental heroine, the narrative reveals the required affected performance. There is a necessary fiction adopted by characters that, aware of the performativity of sensibility, see no inauthenticity in Marianne’s recovery and reformation.

The goal of an affected performance of sensibility, which leads to illness and results in proper and sober judgement, is a successful courtship. For both Camilla and Marianne, illness resulting from affected sensibility and frustrated sexual desires provide opportunities for their future husbands to witness their suffering and thereby judge both their sensibility and bodily awareness prior to formalizing courtship. Camilla and Marianne both transgress accepted feminine behaviour as they attempt to navigate the courtship space because of faulty judgement and purposefully affected performances of sensibility. These transgressions hint at a degree of sexual awareness and desire that cannot be freely admitted. Once Camilla and Marianne become ill as a result of their behaviour, their bodies communicate the penance endured for such

transgressions while simultaneously communicating a purity of mind that almost cannot live with the implications of such deviance. The illness and subsequent reformations, which their future husbands witness, allow for a reintegration into the courtship narrative without any permanent stigmatization.

### **3.2 Reformed Rakes**

When courtship is not the goal, illnesses, specifically fevers, still serve as behavioural correctives. Like female sufferers, male temporary invalids such as *Cecilia's* Albany and *Mansfield Park's* Tom Bertram are permanently marked by their near-death experiences. The reformation of Austen's Tom Bertram is mediated by the narrator, Lady Bertram, Edmund, and Fanny, all of whom impose an illness narrative on Tom without his voice ever being heard. In contrast, Albany remains in control of how he explains his history to Cecilia. In cases of fever and temporary illness, the permanent evidence of any illness is behavioural. The rake Tom Bertram reforms after a bout of fever and reaffirms his commitment to society and his family: "He became what he ought to be, useful to his father, steady and quiet, and not living merely for himself" (*Mansfield Park* 534). The narrative and the character are permanently marked by this change, but without the recurring and lingering pain of a permanent illness like gout. In Burney's *Cecilia*, Mr. Albany's illness occurs before the text begins and is retold to Cecilia as a morality tale. His reformation is extreme, as others continue to regard him as a madman on the periphery of the London *bon ton*; however, those others are part of a completely self-absorbed and indulgent society, and the text is quick to dismiss their frivolity. Austen's Tom Bertram reforms in the last volume of the novel after spending the majority of the narrative causing trouble for his family. His fever serves to bring Fanny home to Mansfield Park, from which she has been exiled, and to reintegrate both Tom and Fanny back into the Bertram family. Tom's



change into a responsible eldest brother who never would have admitted Yates and his idea of family theatricals to Mansfield Park is not as extreme as Mr. Albany's reformation; however, its effects are deeply and locally felt. Whereas Mr. Albany's chastising speeches to the London *bon ton* fall largely on deaf ears, Tom's reformation affects the very core of the Bertram family and has consequences for Mansfield Park. Furthermore, Mr. Albany's previous actions have little effect on Cecilia and the larger *bon ton* society in London. Although there are few characters involved, the effects of Tom's behaviour on his family are immediate.

A secondary character in *Cecilia*, Mr. Albany's presence in the text functions as a cautionary tale to Cecilia, as well as a foreshadowing of Cecilia's own brief madness, and as a foil to the *bon ton* of London. When he finally reveals his life story to Cecilia, he constructs his illness narrative as a tale of reformation. Surprising a nearly inconsolable Cecilia immediately following her refusal of Delvile, Albany presents himself as the arbiter of true suffering. Arguing that "guilt is alone the basis of lasting unhappiness," not the loss of a suitor, Albany attempts to shock Cecilia out of her "dream of fancied sorrow" (*Cecilia* 704). Albany's tale contains two parts: his life prior to being "reformed" by a fever, and his life after that reformation until he is driven mad. Albany seduces the "poor and unprotected... daughter of a villager" near his university, but "in decency could neither marry nor take her directly" with him to Jamaica following the death of his father (705). After leaving her behind, Albany comes into his fortune and "revelled in licentiousness and vice" until "a fever, incurred by my own intemperance, first gave me time to think" (705). During this fever, Albany remembers his former lover and the promises he made to her. Apparently reformed by this fever, Albany returns to England but is unable initially to find her. Upon finding her and discovering "the fatal tale of her undoing" (706), Albany "barbarously struck her! – nor single was the blow! – it was doubled, it was

reiterated!” (706); Albany’s reaction completely subverts his claims of reformation by fever. His claims of “frantic fondness, and bitterest contrition” (706) at his past behaviour are meaningless as, when given an opportunity to behave with proper judgment, he fails utterly to prove himself changed. Understandably, she flees immediately from Albany, only to be discovered by him two years later, when he abducts and holds her in the country. She starves herself to death, having vowed “to live speechless and motionless, as a penance for her offences” (708). Following her death, Albany “kept her loved corpse till my own sense failed me, - it was then only torn from me, - and I have lost all recollection of three years of my existence” (708). This second illness – suspected by Cecilia, among others, to be an unspecified madness and a period of confinement in a private madhouse – gives rise to his current mission to “admonish all who will hear me” (708) and “seek the distressed where-ever they are hid” (708). Albany’s regained sanity is understandably suspect: “His flightiness, wildness, florid language, and extraordinary way of life, had long led [Cecilia] to suspect his reason had been impaired” (708). Albany is keen to present himself as reformed through the double narratives of fever and madness, but neither Cecilia nor the narrator pronounces him cured. Although he has stopped engaging in various vices, such as debauching and abducting young women, Albany’s singular obsession does leave his sanity in question.

Albany presents himself as reformed; however, he still has difficulty in restraining himself. Rather than single-minded pursuit of his pleasures, he obsessively pursues his agenda to enlighten all willing to listen. His avowed mission leaves him on the periphery of fashionable London society as a figure of ridicule and gossip. Albany’s story has the desired effect on Cecilia. The narrator describes Albany’s lecture as “wild, flighty and imaginative as were his language and counsels, their morality was striking, and their benevolence was affecting” (710).

Albany serves as a cautionary tale to Cecilia, but the essential feature to his tale is his experience of illness. His construction of a fever narrative fits the sentimental novel's paradigm of reformed rake; neither Cecilia nor the narrator questions Albany's truthfulness, although both remain suspicious of his sanity. Although he is not physically marked by this transformation, Albany's suspect sanity denies him reintegration into his society. As foreshadowing of Cecilia's eventual but brief madness, Albany's story serves to provide Cecilia with a model for emulation during her recovery.

Both Burney and Austen use fevers to cure moral weakness and poor behaviour, cures that effectively mark the sufferers as changed; however, while Burney leaves Albany outside his former society by denying his reintegration following his fever and madness, Austen allows her fevered fools to return to their communities. Both *Mansfield Park*'s Tom Bertram and *Persuasion*'s Louisa Musgrove suffer through illnesses that force them to moderate their previously unacceptable behaviour before they can be reintegrated back into their respective communities. Tom becomes a useful and productive member of the Bertram family and Louisa marries Benwick, satisfactory conclusions that prove each former invalid has learned from his and her mistakes. The proof of their respective reformations is marked by the mediation of another character with his or her own construction of the illness narrative. In Burney's novels, the disabling process, albeit temporary, is a necessary, positive step in attaining moral worth and reformation. Like Burney, Austen's narrative remains slightly suspicious of real reformation, as all reports of change are mediated through admittedly biased characters.

Tom Bertram's responsibility for much of the moral upheaval and public exposure of the inherent disorder at Mansfield Park results from his questionable judgement of introducing of Mr. Yates and the idea of family theatricals to the household. The narrator articulates

displeasure, echoed by Fanny and Edmund, that “Sir Thomas would probably have thought [Mr. Yates’s] introduction at Mansfield by no means desirable” (*Mansfield Park* 142). The theatricals cause moral disruption by allowing for the seductions of Edmund (by Mary Crawford), Maria (by Henry Crawford), and Julia (by Yates). After learning Yates and Tom’s plans for the family theatricals, Edmund hastens to explain that the absent Sir Thomas would not approve of the endeavour:

“I think it would be very wrong. In a *general* light, private theatricals are open to some objections, but as *we* are circumstanced, I must think it would be highly injudicious, and more than injudicious, to attempt any thing of the kind.... And it would be imprudent, I think, with regard to Maria, whose situation is a very delicate one, considering everything, extremely delicate.” (147)

Edmund refers here to Maria’s possible engagement to Mr. Rushworth, a relationship that Sir Thomas has not yet sanctioned; however, it is also possible that Edmund is hinting at the impropriety of Henry and Maria’s mutual interest. Tom ignores Edmund’s advice, which gives the Crawfords and Yates opportunity to seduce their prospective lovers. While Mary is ultimately unsuccessful with Edmund, both Henry and Yates succeed in their seductions of the Bertram sisters. Not only does Tom completely disregard his father’s wishes, but also by ignoring Edmund, Tom inadvertently assures his role in his sisters’ eventual downfall and disgrace.

Tom reappears later in the novel struck with a severe illness that serves to reconcile him to his family and to reform his character. Sent back to school following Sir Thomas’s return, Tom first reappears in Lady Bertram’s letter to Fanny relaying his illness, which in turn is mediated through Fanny’s mind and finally reported by the narrator to the reader. His illness is

initially caused by “a neglected fall, and a good deal of drinking, had brought on a fever” (493). Fanny’s own thoughts on Tom that “she considered how little useful, how little self-denying his life had (apparently) been” (496) frame Tom’s fever as moral judgment on his defective character. His fever brings Fanny back to Mansfield Park; however, his reformation comes too late to help his sisters. While he makes “alarmingly slow” (498) improvement “through an illness, which had now, under different degrees of danger, lasted several weeks” (501), Julia and Maria remain in London. When news of his sisters does arrive, the scandal of their respective love affairs causes a resurgence of Tom’s illness “and his recovery so much thrown back by it, that even Lady Bertram had been struck by the difference” (522). This reaction confirms for Fanny the link between morality, guilt, and illness. As with *Cecilia*’s Albany, both Fanny and the narrator connect Tom’s past behaviour to his present suffering, and the text presents no ambiguity in this direct relationship.

Perhaps the most curious aspect to Tom’s illness and reformation is that his voice remains unheard for the rest of the novel. Unlike *Cecilia*’s Albany who directly relates his interpretation of his illness narrative, Tom’s narrative rests entirely in the hands of his family and the narrator. Louise Flavin argues that the lack of Tom’s voice is a narrative technique: “The narrator shows moral distance from such a character by presenting his speeches either directly or in quoted free indirect form” (145). Because of Tom’s moral distance from the narrator, his narrative perspective is not nearly as important as how Fanny and the Bertram family interpret Tom’s illness. During Tom’s illness the narration follows Fanny, who remains in Portsmouth until after Easter and cannot attend Tom’s bedside; however, even after her return to Mansfield, Tom’s voice is not heard. Like *Persuasion*’s Louisa, Tom’s reformation narrative is related at a distance through Fanny and the narrator, neither of which offers a privileged view of the

sickroom. Instead, Fanny frames Tom's illness narrative in such a way that his moral reformation is inevitable. After Lady Bertram determines that "Tom's immediate danger was over" (*Mansfield Park* 497) Fanny reflects on what Tom's recovery must entail. Through the narrator's voice, Fanny reflects on Edmund's letter: "There was not only the debility of recent illness to assist; there was also, as she now learnt, nerves much affected, spirits much depressed to calm and raise; and her own imagination added that there must be a mind properly guided" (498). Fanny believes that moral education is necessary to the recovery process. Through the narrator, Sir Thomas shares Fanny's beliefs, reporting that Tom "was the better for ever for his illness.... He became what he ought to be, useful to his father, steady and quiet, and not living merely for himself" (534). Tom merits no further mention in the text as he has completed his function. Tom has served as the initial source of his sisters' moral decline, has been punished for his own profligate ways and vices, and has been declared reformed and cured by Fanny, Sir Thomas, and the narrator. But as *Persuasion*'s Anne constructs her own illness narrative for Louisa, so too does Fanny for Tom. The invalid's voice has no place here, nor does he have any control over how his family interpret his illness and recovery. Unlike Albany, who asserts control over the telling and framing of his narrative, the narrative refuses the same control to Tom. Austen's emphasis on Fanny's framing of Tom's illness and recovery, rather than Tom directly narrating his own experience like Albany, indicates an awareness of the artifice of the illness narrative within the text and reveals Fanny's own bias.

### **3.3 Austen and the Fallen Woman**

*Persuasion*'s Louisa Musgrove suffers the most extreme moral correction of Austen's novels. She suffers a silencing similar to that of *Mansfield Park*'s Tom Bertram following her fall off the Cobb, which is one of the most violent moment in all of Austen's novels, alongside

the overturned carriage and subsequent sprained ankle in the opening of *Sanditon* and the unseen duel of *Sense and Sensibility*. While Louisa does not suffer a virulent fever, she adheres to an illness narrative and has a perceived change in behaviour as the result of the knock on the head. Prior to Louisa's fall, her flirtatious behaviour towards Captain Wentworth leaves her morality and propriety in serious question. During the excursion at Uppercross, Louisa makes a sexually charged comment while discussing carriage rides. Wentworth observes that the Admiral is a notoriously poor carriage driver, stating, "I wonder whereabouts they will upset to-day!" (*Persuasion* 91). Louisa suggestively replies that "if I loved a man, as she loves the Admiral, I would always be with him, nothing should ever separate us, and I would rather be overturned by him, than driven safely by anybody else" (91). The narrator then curtly notes that Louisa's statement "was spoken with enthusiasm" (91). The double-entendre of overturning is clear and is understood by Wentworth. As Dalton points out, "Louisa, with her sexual enthusiasm, is plainly volunteering to be 'overturned' by Wentworth" (53). This moment is soon succeeded by an intimate conversation between Wentworth and Louisa, which Anne overhears while sitting in a hedgerow and concealed by "a bush of low rambling holly" (*Persuasion* 95). While discussing morning visits to Winthrop, Wentworth pauses to opine on a hazelnut, apparently to illustrate his point on firmness versus indecisiveness:

"To exemplify, - a beautiful glossy nut, which, blessed with original strength, has outlived all the storms of autumns. Not a puncture, not a weak spot any where. - This nut," he continued, with playful solemnity, - "while so many of its brethren have fallen and been trodden under foot, is still in possession of all the happiness that a hazel-nut can be supposed capable of." (94)

Wentworth's comparison of Louisa's firmness to that of the hazelnut goes beyond praising her

mental determination. By comparing her physically to the hazelnut, Louisa's physical body and sexuality are brought into play. Like the nut, Wentworth views Louisa as similarly without puncture. Dalton points out, this "overheard flirtation, during which Louisa expatiates on the firmness of her own character and her immunity to persuasion, ends appropriately enough with Wentworth giving Louisa a nut, as if to consummate the episode with a sexual pledge" (54). Dalton argues the implication of this passage is both Louisa's endangered virginity and Wentworth's overt virility. Reading Wentworth's nut as equivalent to "a sexual pledge" (54), and taken alongside Louisa's willingness "to be 'overturned' by Wentworth" (53), Louisa's comment indicates her lack of proper female reserve regarding declaring interest in a male suitor. There is an undeniable sexual undertone to Louisa and Wentworth's flirtatious interactions throughout their expedition. The narrator records Louisa's brief silence following Wentworth's statement, but Anne does not record herself or Louisa as scandalized. Instead, the narrator transcribes Anne's reaction to the conversation of the nut and Wentworth's subsequent declaration of interest in Louisa as "words of such interest, spoken with such serious warmth!" (*Persuasion* 95). Louisa's lack of a scandalized reaction indicates her own potentially disruptive awareness of her body and Wentworth's intentions, as well as her own questionable propriety. Like Marianne, Louisa's knowledge revealed through the narrator indicates a degree of sexual awareness that has the potential to render her improper to potential suitors and ineligible for marriage. Of course, Anne, who overhears this conversation, is not oblivious to the sexual undertones, indicating her own improper understanding of sexual innuendo. Anne, unlike Louisa, does not betray this knowledge, leaving Anne's status as a proper lady unimpuned, save to the narrator's privileged access. Wentworth, in contrast, is aware of Louisa's "enthusiasm", signifying a lapse in morality that must now be corrected before marriage (91).



In addition to her potential moral decline, Louisa's behaviour includes a dangerous physical fall. Both declines require moral and physical correction prior to successful reintegration into the courtship narrative. Wentworth praises Louisa's single-minded determination, which in turn leads to her near-fatal fall at Lyme Regis. Prior to walking out on the Cobb, Louisa demands to be "jumped down" (118) the various stiles and steps by Wentworth. On the Cobb, Wentworth argues against Louisa jumping down the steps, but after her first successful jump "to shew her enjoyment, ran up the steps to be jumped down again" (118). Louisa declares that she is "determined" (118) to jump. Wentworth "put out his hands; she was too precipitate by half a second, she fell on the pavement on the Lower Cobb, and was taken up lifeless" (118). Louisa's fall is the culmination of her lack of propriety and moderation. Like the immoderate drinking and carousing of *Mansfield Park's* Tom, Louisa's lack of bodily regulation leads to a physical and moral fall. In other words, Louisa's fall is symbolic of a moral decline, not simply a physical fall. She is, as Dalton states, "a fallen woman" (54). Her recovery, therefore, requires a marriage and a reflective, sober life in order to avoid further faults of propriety and to ensure reintegration into her community. In this plan Louisa appears to mimic Marianne; however, her choice of literature provides little strengthening of judgment or tempering of unrestrained energy. John Morillo observes Louisa's recovery and reintegration are not seamless. He argues that by engaging with Byron and the associated Satanic School throughout her courtship and recovery with Benwick, she remains a fallen woman, "conform[ing] to the model of sentimental reader" (210) with "equally diabolical and debilitating choices for women's acceptable romantic conduct" (209). She is unable to control her own narrative, as Anne attempts to do in her conversation with Harville concerning women in literature (209). Prior to Louisa's fall, Anne expresses her concern to Benwick over his reading

materials, although she is aware she has “been eloquent on a point in which her own conduct would ill bear examination” (*Persuasion* 109). Anne is conversant in moral literature, not solely the Romantic works of Byron and Scott; therefore, her melancholy reflections are tempered by moral judgment. Louisa’s convalescence echoes that of Anne’s own long recovery from depression; however, the difference lies in which books and poems can be safely applied to provide a cure.

Louisa’s recovery, like that of Tom Bertram and Albany, occurs offstage and is subject to the mediation of the narrator and intervening characters. Presented through indirect narration of both events and Anne’s conjecture, Louisa’s recovery narrative is subject to the narrator’s subjectivity and mimicry of Anne’s Romantically-inclined interpretation of events. Anne wilfully invents an elaborate romantic courtship between the melancholic Benwick and the recovering Louisa based upon Anne’s belief that “of course they had fallen in love over poetry,” (182) which reveals her own Romantic inclinations. The narrator, mimicking Anne’s voice, supposes that the cause of the courtship was that “they had been thrown together for several weeks... and Louisa, just recovering from illness, had been in an interesting state, and Captain Benwick was not inconsolable” (181). As Daniel Gunn points out in his work on *Emma*, the form of free indirect discourse employed here is “a kind of narratorial *mimicry*, analogous to the flexible imitations of others’ discourse we all practice in informal speech and expository prose” (35-36). By appropriating Anne’s voice, the narrator’s subjectivity is revealed. Gunn states “there are typically two subjectivities expressed in Austen’s FID passages – the subjectivity of the imitated character *and* the underlying subjectivity of the imitating narrator, whose extended, protean utterance frames and controls the representation of figural thought or speech in FID” (40). Through the narrator, Anne continues to imagine the evolution of their courtship: “Louisa

had fine naval fervour to begin with, and they would soon grow more alike. He would gain cheerfulness; and she would learn to be an enthusiast for Scott and Lord Byron; nay, that was probably learnt already; of course they had fallen in love over poetry” (*Persuasion* 181-182). Anne’s fantasy denies Louisa control over her own narrative. In the absence of Louisa’s bodily presence in the novel, Anne constructs her own illness narrative for Louisa, regardless of what the absent Louisa may attempt to project. Anne imagines that

the idea of Louisa turned into a person of literary taste, and sentimental reflection, was amusing, but she had no doubt of it being so. The day at Lyme, the fall from the Cobb, might influence her health, her nerves, her courage, her character to the end of her life, as thoroughly as it appeared to have influenced her fate. (182)

Anne constructs an illness narrative for Louisa that parallels that of the melancholic Benwick. In short, Louisa’s bump on the head is as necessary for her moral reformation as a course of Romantic poetry; therefore, within the limited society of Benwick and his Romantics, she is redeemed. Her temporary disabling allows for the sickroom to become a suitable location for courtship. Ultimately, she is not in control of the narrative. Rather, those who observe her recovery have the power to frame the narrative in a manner that reflects their own conceptions of what illness and reformation narratives represent.

### **3.4 Conclusion**

Illness narratives, endemic to sentimental literature, serve as a crucible for morality and judgement, while simultaneously allowing for strict observation and scrutiny of the invalid’s body. It is through the illness narrative that the communicative power of the body is most potent, signalling judgement for rakish behaviour in male characters or representing the struggle between feminine propriety and sexual desire in female characters. The curative function of

illness reforms overindulgent performances of sensibility by sentimentally-inclined heroines; however, the illness itself communicates the ardour of their emotions to potential suitors, making the invalid's body available for close observation and scrutiny. In male invalids, the illness narrative frames the reformation of rakish behaviour, communicates repentance to observers, and results in moral behaviour and reintegration into their society. The artifice of the illness narrative is revealed through denying a voice to the recovering invalid, as Austen denies Tom Bertram and Louisa Musgrove, moving the power of narrative framing to the observers, and thereby allowing the framing of the illness narrative to reflect more about the observer than the invalid.

## CHAPTER FOUR

### **Temporary Mental Impairment and the Culture of Sensibility**

Like physical impairment in the novels of Burney and Austen, social construction of mental illnesses such as melancholy, delirium, and suicidal ideation features prominently in the courtship narratives; furthermore, as with physical impairment, the Culture of Sensibility and gender complicate the representation of these mental impairments. Burney's use of mental impairment functions primarily as a means to expose the debilitating constraints of gender performance, as well as to provide another proof of membership within the Culture of Sensibility. The performativity of mental impairment is present, but Burney's narrator does not chastise this indulged behaviour. Conversely, Austen's use of mental impairment, while reinforcing the impairment as social construction linked to the Culture of Sensibility, allows for explicit criticism of affectation. While Burney's novels refrain from exposing the artifice completely, Austen's novels draw attention to this trope by removing the suitors from the sickroom, effectively dismantling the established courtship narrative. Heroines performing temporary mental illness allow both Burney and Austen narrative space to expose the constraints of gender roles and necessity of affectation demanded by propriety and the Culture of Sensibility. Both Burney and Austen use the familiar eighteenth-century trope of a female character driven mad by romantic disappointment; however, both authors make the performative aspect of this temporary mental illness explicit, revealing the necessity of expressing desire in order both to resolve the courtship narrative and regain mental health.

Numerous scholars have explored the literary history of melancholy in eighteenth- and nineteenth-century novels, as well as the cultural history of melancholy and mental illness throughout the late-eighteenth and early-nineteenth century. Roy Porter's exploration of mental

illness in the eighteenth century reveals how mental illness became gendered; specifically, the Culture of Sensibility and its female adherents' frequent recourse to nervous complaints reinforced the belief of innate female nervous delicacy. Porter states

we have not a single testimony penned by an eighteenth-century woman who went utterly out of her mind; but the melancholy of sensibility, shading into hysteria and couched in the language of 'nerves', became a common rule through which women established a self – but one which ultimately affirmed gender stereotypes. (*Mind Forg'd Manacles* 244)

As Porter points out, adopting this behaviour allowed women “to give vent to their feelings and cope with life's demands” (106). Building on Porter's work, Allan Ingram's analysis of literary representations of madness in the eighteenth century reveals the ambivalent attitude towards mental illness. Ingram states “the eighteenth century was in two minds about madness, fearful of its power, its suddenness, its inaccessibility, yet obsessed with its manifestations, its proximity, its apparently mischievous aping of sane behaviour, of sane patterns of thought” (*Patterns of Madness* 2). Importantly, Ingram reveals a connection between the Culture of Sensibility and female mental illness: “in the eighteenth century, the link between the concept of madness and ideals of femininity – such as those outlined in the realm of sentiment – were so strong that definitions of female madness rarely strayed from definitions of femininity” (*Cultural Constructions* 164). This connection between madness and femininity features in the temporary mania experienced by the female heroines in both Burney's and Austen's novels.

Within the novels of Burney and Austen, mental illness is inextricably linked to the Culture of Sensibility and performance. Emily Hodgson-Anderson focuses on the theatricality involved in Burney's narratives of temporary insensibility:

Burney makes her heroines responsible for their own insensibility, yet ultimately unconscious of the spectacle they create; these women simultaneously exhibit and excuse the kind of female agency over expression and presentation that Burney found so troubling about a theatrical career. (632)

The moment of insensibility, therefore, allows the heroines “to communicate previously repressed internal torments” (631) in a manner that allows for propriety to be maintained. Jane Kromm argues that both Burney and Austen “represent mania in women as a way of broaching problematic assumptions about gender” (346). Specifically, Kromm posits that Burney’s treatment of Cecilia “gives special prominence to the role of gender in social constructions of madness” (362). As such, mental illness functions as a narrative prosthesis, enabling each author to confront the social constraints of gender and expression. Helen Small explores Austen’s use of madness as a metaphor and as a plot device. Fundamentally, Small believes

Austen’s engagement with the love-madness convention forms part of a more extended examination of the culture of sensibility. Sensibility helps uphold the material distinctions of wealth and power in the society she portrays. Essentially, it serves a conservative function, registering and maintaining the divisions of class, power, property, and propriety. (91)

Small argues that Austen’s depiction of madness serves to reveal the dangerous performativity of mental illness, especially as a requirement for Sensibility. Regarding *Sense and Sensibility*, Small states that “Austen’s language vacillates between presenting Marianne as actively cultivating a false sensibility and presenting her as the victim of a sincerely suffering sensibility” (96). The unifying factors in these readings of Burney and Austen are the presence of a social construction of mental impairment and the necessity of a Sensibility-based performance.

When Cheyne categorized melancholia as a symptom of weak nerves, thereby divorcing it from the humoral system without changing its outward signs, melancholia became inextricably linked to the Culture of Sensibility and the mind. Prior to Cheyne, melancholy was not linked to creative intelligence and imagination. For example, Pope writes negatively of melancholy's creative attributes as the

... Parent of Vapours, and of Female Wit,  
Who give th' *Hysteric* or *Poetic* fit;  
On various Tempers act by various ways,  
Make some take Physic, others scribble Plays. (*The Rape of the Lock* 4.59-62)

Cheyne moved the seat of melancholy from the spleen to the brain, and the symptoms of melancholy are described instead in terms of their connection to animal spirits and nervous juices. What remains unchanged throughout this shift of melancholia from humoral to nervous system is the physical performance necessary for diagnosis. He argues that the symptoms of melancholy "we commonly ascribe to the Spleen" (193) are actually the result of "bad, sharp, thick, and viscid Juices, attended with weak and relaxed Nerves, Fibres, or Solids" (194). While the disorder of the spleen may be involved in the production of symptoms of melancholy, Cheyne believes it is not the cause. He further outlines the physical symptoms of the "second stage" (199) of a nervous distemper as

a deep and fixed Melancholy, wandering and delusory Images on the Brain, and Instability and Unsettledness in all intellectual Operations, Loss of Memory, Despondency, Horror and Despair, a Vertigo, Giddiness or Staggering, Vomittings of Yellow, Green, or Black Choler: sometimes unaccountable Fits of Laughing, apparent Joy, Leaping and Dancing; at other Times, of Crying, Grief,



and Anguish; and these generally terminate in Hypochondriacal or Hysterical Fits (I mean Convulsive ones) and Faintings, which leave a Drowsiness, Lethargy, and extreme Lowness of Spirits for some Time afterwards. (199)

Cheyne's description includes particular attention to the involvement of the brain and nervous system. In fact, many of these symptoms of poor nerves associated with refined sensibility overlap with melancholia. Aside from vomiting, which Cheyne describes and Burney and Austen both omit, the difference between melancholy and the performance of sensibility is the degree of seriousness of the illness. Cheyne's description of weak and tender nerves includes instances of "great Lowness, Fainting or Fits" (100). His inclusion of "quick Thinkers, [who] feel Pleasure and Pain most readily, and are of most lively imagination" (105) in his description of weak nerves counters Pope's earlier claim that melancholy is connected to poorly-executed literary and creative activities. The growing influence of the Culture of Sensibility maintains that the affliction of melancholy can have positive products, such as writing literary works or feeling a particular text more keenly than others. Within the Culture of Sensibility, melancholia had the potential to confer status to the sufferer; however, as with sensibility, the danger of affectation of melancholy in order to gain status remains.

By the time Johnson was compiling definitions for his dictionary, the seat of melancholy was placed firmly in the mind. Johnson once told Burney "'madness is occasioned by too much indulgence of imagination'" (qtd in Porter, *Mind Forg'd Manacles* 60), limiting any further bodily involvement and indicating a degree of moral culpability. In Johnson's *Dictionary* melancholy is "a kind of madness, in which the mind is always fixed on one object," a definition that stems from Jaques's speech in Shakespeare's *As You Like It* which lists the various performances of melancholy (IV.1.10-20), and "a gloomy, pensive, discontented temper," from

Dryden's *Cleomenes* and points to melancholy's effeminizing effects ("Melancholy"). Absent from Johnson's definition is any mention of Sensibility; instead, Johnson gives the humoral "black bile" as the prime cause behind melancholia, although he allows that cures can be brought about by "nervous medicines, and powerful stimuli". As W. F. Bynum points out,

With Cheyne, 'nervous' acquired some of its modern connotations, although Dr Johnson, with his firm sense of historical etymology, lamented its new and trendier meaning.... In his *Dictionary*, Johnson gave as the first meaning of 'nervous' the older one: 'well strung; strong; vigorous'. Its second meaning was also acceptable to him: 'Relating to the nerves; having the seat in the nerves.' Finally, with Cheyne as his authority, Johnson recorded a third meaning of 'nervous': 'Having weak or diseased nerves', indicating his disapproval by the stern caveat that this usage was '*medical cant*'. (91)

While Johnson's definition of "nervous" records his opinion of Cheyne, both Johnson's and Cheyne's definitions of melancholy indicate an active performative component ("Nervous"); Cheyne's mental "wanderings" and Johnson's obsessive fixity both indicate mental involvement that becomes visible through a physical bodily performance.

The potential danger of the imagination is apparent in both Cheyne's and Johnson's concern for the melancholic's inability to overcome his or her obsessive or frantic thoughts. As Porter explains,

Gallop[ing] imagination, viewed in another light, marked the failure of the powers of attention or control. As Dr Alexander Crichton argued at the close of the eighteenth century, imagination must be either voluntary or involuntary. Voluntary imagination (i.e. that governed by will) begets ideas and art;

involuntary imagination, in contrast, spews nonsense. (*Mind Forg'd Manacles* 102).

Nervous individuals, predisposed to melancholy because of their innately delicate nervous systems, had a choice: either to avoid stimuli that would evoke a melancholic response, or accept the status that came with being designated a melancholic within the Culture of Sensibility.

Porter notes the appropriation of this aspect of mental illness by the gentry in order to prove good breeding through nervous refinement:

Freed from contamination by the demoniacal and the vulgar, the elite could luxuriate in the self and toy with mental and emotional singularities, in so far as these squared with other cultural desiderata such as aspirations to artistic genius, refined sensibility, sublimity, or being an 'original'. Nervous disorders were gentrified and received into good society. (108)

Those with a predisposition to melancholy because of their overly delicate sensibility, however, were chastised if they purposefully and wilfully indulged in potentially dangerous sensations.

Foucault summarizes this tension between innocent and guilty sufferers within the Culture of Sensibility, stating that those who seek nervous irritation are

more guilty, much more guilty, because everything to which one was attached in the world, the life one had led, the affections one had had, the passions and the imaginations one had cultivated too complacently – all combined in the irritation of the nerves, finding there both their natural effect and their moral punishment.

(*Madness and Civilization* 157)

The implication is that purposeful indulgence in melancholy-provoking stimuli indicates a lack of desire to remove the painful stimuli; however, by giving up any claim to melancholy, status is

then lost. This dilemma is present in both Burney's and Austen's novels as characters claiming melancholy must perform according to the social construction by the Culture of Sensibility.

#### **4.1 Performing Melancholy**

In Burney's *Evelina*, Evelina's recognition of Macartney's melancholy reveals more about the heroine's claims to the Culture of Sensibility than the mental health of the "Scotch mope" (217). In a letter to her guardian Mr. Villars, she describes Macartney as "a young man, in deep mourning, leaning against the wall, with his arms folded, and his eyes fixed upon the ground, apparently in profound and melancholy meditation" (177). According to Evelina's understanding of sentimentalism and Sensibility, Macartney's downcast state is a somatic manifestation of mental anguish. Only Evelina recognizes his melancholy, a fact that separates her from the Branghtons, who feel no empathy for their lodger's emotional state, and provides her with a claim to superior understanding of Sensibility (178). While the Branghtons remain unmoved by Macartney's state, Evelina's reaction of sinking "on the ground, without sense or motion" (185) is one of her own afflicted sensibility, which she relates to Villars. By framing her reaction using the sentimental language of Sensibility, Evelina aims to present herself as having innate and natural sensibility; however, this sensibility is informed by London's fashionable elite.

Evelina's later mimicry of Macartney's melancholic behaviour further reveals the social construction of melancholy as a positive attribute within the Culture of Sensibility; however, this melancholy is an affectation of reserve, which in turn undermines Evelina's claims to natural Sensibility. Writing to Miss Mirvan, Evelina recounts her "depression of spirits" (255), and that when she "was alone, my spirits failed me; the exertion with which I had supported them, had fatigued my mind: I flung away my work, and, leaning my arms on the table, gave way to a train

of disagreeable reflections, which, bursting from the restraint that had smothered them, filled me with unusual sadness” (263). Her failure to read correctly her body’s sensibility indicates her bias towards the Culture of Sensibility and the social protection gained from membership. This membership is tested by Evelina’s accepting a letter from Lord Orville, acceptance which is wholly improper. Villars tells Evelina that immediately returning the letter to Orville would have been the proper response, as “such a resentment would at once have become *your* character” (267-268). Rather than reading her melancholic reserve as signalling membership within the Culture of Sensibility, Villars employs a more moralistic view of Evelina’s mental distress. After Evelina is removed from London society, it is Villars’s opinion of what her mental distress indicates that dictates her opinion. Her mental distress ceases to signify melancholy and its attendant membership within the Culture of Sensibility; however, as Villars explains, Evelina’s moral sense remains connected to her sensibility: ‘Your indignation,’ said he, ‘is the result of virtue’ (268). While this connection is more difficult to perform, Evelina can still claim sensibility. Villars refrains from exposing Evelina’s affectations to the Culture of Sensibility, and instead directs her attention to deciphering her sensations accurately without recourse to sentimentality and deception. Evelina’s insistence on maintaining her reserve reveals her ability to dissemble and perform, thereby undermining her claims to unaffected innocence.

The social construction of melancholy is also present in Austen’s *Persuasion* which, like Burney’s *Evelina*, contains a heroine with an almost singular ability to detect melancholy and recognize Sensibility. In *Persuasion*, Anne’s experience of melancholy informs both her behaviour and how she reads melancholy in Benwick; however, the narrator is quick to undermine any sentimentalism by exposing the inherent social construction and performativity of Anne’s melancholy. While walking alone after being left behind by the Musgroves and

Wentworth, Anne reflects on autumn, a distinctly melancholic subject. The narrator records Anne's thoughts:

Her *pleasure* in the walk must arise from the exercise and the day, from the view of the last smiles of the year upon the tawny leaves and withered hedges, and from repeating to herself some few of the thousand poetical descriptions extant of autumn, that season of peculiar and inexhaustible influence on the mind of taste and tenderness, that season which has drawn from every poet, worthy of being read, some attempt at description, or some lines of feeling. (*Persuasion* 90)

The narrator makes it clear that Anne's poetical musings are an attempt to distract herself from Wentworth's conversation with the Miss Musgroves (90); however, Anne's knowledge of various quotations from autumnal-themed poems indicates that she is more than a casual reader of melancholic poetry. Anne's behaviour has the appearance of naturalness because of her repeated performances of reciting melancholy and autumnal poetry. She has no immediate audience save for herself; however, her performance of Sensibility indicates internal surveillance, similar to that practiced by *Mansfield Park*'s Fanny. Overlooking the autumnal scene, Anne feels that she must recall melancholic poetical descriptions and acts accordingly. The narrator censures Anne for her sentimental reading of the pastoral scene. After waxing poetic on the "sweet scenes of autumn" (91), the narrative voice breaks from relaying Anne's thoughts to provide another view of the same landscape. The "tawny leaves and withered hedges" (90) are replaced by "large enclosures, where the ploughs at work, and the fresh-made path spoke the farmer, counteracting the sweets of poetical despondence, and meaning to have spring again" (91). Anne is unable to see the activity and work in her autumnal landscape. This disparity further indicates Anne's practiced and performative Sensibility no longer requires

conscious thought to bring about the performance. Mooneyham argues that this juxtaposition is evidence of Austen's Christian Stoic philosophy (152) as "Anne is aware of the dangers inherent in a too-heavy reliance on seductive melancholy" (154); however, it is clear from Anne's immediate recourse to melancholic quotations that she is far from overcoming her melancholy. In fact, it is in her conversation with the mourning Benwick that Anne's own dangerous reading habits are addressed.

Benwick's depression and compulsive reading of Romantic texts provides a mirror to Anne's similar literary indulgences and exposes the performance required by Anne's conception of melancholy. Anne reads his body having a "melancholy air, just as he ought to have" (*Persuasion* 105). The narrator relates Wentworth's description of Benwick, which includes "a little history of his private life, which rendered him perfectly interesting in the eyes of all the ladies" (104). As with Anne's melancholy, Benwick's connection to the Culture of Sensibility, in addition to his bereavement, gives him an exemption within social situations. He is expected by Anne to be literary, solemn, and full of feeling. In their discussion of various Romantic poems,

he showed himself so intimately acquainted with all the tenderest songs of the one poet, and all the impassioned descriptions of hopeless agony of the other; he repeated, with such tremendous feeling, the various lines which imagined a broken heart, or a mind destroyed by wretchedness, and looked so entirely as if he meant to be understood.... (108)

Benwick's desire "to be understood" by Anne reveals the importance of the audience's role in conferring the diagnosis of melancholia. Anne is able to recognize Benwick's performance as melancholy because it resembles her own performance closely. Simultaneously, Anne is aware

of her society's expectation that a melancholic should strive to endure and overcome his or her lowness. In recommending "such works of our best moralists, such collections of the finest letters, such memoirs of characters of worth and suffering" (109), Anne follows the standard prescription for melancholics; however, she is also aware of her performance of the illness narrative and the hypocrisy of her recommendation. Anne could not "help fearing, on more serious reflection, that, like many other great moralists and preachers, she had been eloquent on a point in which her own conduct would ill bear examination" (109). Although she speaks as though she has succeeded in overcoming her melancholy in her extolling the "duty and benefit of struggling against affliction," (108) Anne herself continues to struggle "against a great tendency to lowness" (105). This performance of literary indulgence provides the basis of Anne's social construction of melancholy, although the narrator resists adherence to this social construction.

Contrasting Anne and Benwick's performances of a literary-based melancholy is Mary's sudden and entirely affected performance upon remembering that the Crofts are arriving at Kellnych. Anne has spent three weeks in silent mourning for the loss of her home, but Mary's sentimental exclamations completely overshadow Anne's quiet performance. Mary proclaims "how low it makes me!" (51) when she is reminded of the Crofts' imminent arrival, insisting that "nobody knew how she should suffer" (51) having to visit them. Her comments are immediately subverted by her eagerness to visit the Crofts. Her inability to maintain the accepted performance of melancholy serves as a foil to both Benwick's and Anne's more authentic and sustained performances of melancholy; however, both Benwick's and Anne's behaviour is a performance based on how they believe melancholy should appear. Furthermore, while both Anne's and Mary's performances of melancholy reveal frustration within their prescribed gender roles, Anne's melancholy is given greater credence because it follows closely accepted



melancholic behaviour. Mary's energy undermines her affectation of melancholy, rendering her protestations useless. Anne's melancholy provides the standard by which all other melancholics are judged. By this standard, as there are no books in Mary's sickroom, she cannot possibly be anything but affected.

The social construction of gender further complicates eighteenth-century narratives that contain descriptions of mental illness. The strict codes of propriety forbid women from divulging their sexual intentions or from revealing sexual interest. Temporary mental illness, like temporary physical disability, allows for a bodily representation of a heightened emotional state without requiring the heroine to verbalize her desires. While both Burney and Austen use melancholy in their novels, a heroine's temporary mania inevitably coincides with stifled expression. As a result, a heroine's temporary mental senselessness allows her body to express physically the emotions that cannot, for propriety's sake, be uttered. Transitory mental impairment is essential for the narrative resolutions of both *Camilla* and *Cecilia*; however, Austen's *Sense and Sensibility* distorts Burney's trope, thereby exposing a heroine's temporary madness as a narrative technique to evade the sentimental novel's constraining propriety.

The trope of overwrought heroines incapable of functioning after romantic disappointment is a feature of sentimental writing, but the performances are informed by the eighteenth-century's interest in manifestations of madness and mania. Ingram argues that as the eighteenth century progressed, sentimental literature portrayed women of Sensibility as incapable of functioning without men:

Women – at any rate, the best of them, the most delicate, the women of sensibility – were thought to be utterly passive, pitiable, gentle. The popularity of the Ophelia figure suggests the view that, in their passivity and utter malleability,

women were so dependent upon their relationships with men that with the destruction of their bonds with the opposite sex would surely come the destruction of their mental health and of their very beings. (*Cultural Constructions* 154)

A female character suffers madness and mania only as a result of being spurned or rejected by her lover; however, this temporary madness is necessary for narrative resolution as it allows for the female character to communicate what cannot be verbalized without compromising her propriety. Under these circumstances, Burney's Cecilia and Camilla can articulate their devotion to their respective suitors without damaging their own social standing. Furthermore, this temporary mental illness is further proof of their delicate sensibility, thereby reaffirming their membership within the Culture of Sensibility. As Porter explains,

following Cheyne, commentators argued that fine feelings and nervous conditions were 'beauty spots' amongst the more refined ladies of the nation – the 'English milady' readily fell victim to the 'English malady'. Ladies suffered disturbance because their feelings were so readily touched. The fair sex, it was alleged, would even aspire to the vapours or hysteria, to prove their superiority and so capture attention. (*Mind Forg'd Manacles* 105)

Affectation of mental disturbance, such as melancholy, could translate into male attention. Indeed, female melancholy in both Burney's and Austen's texts is treated by many of the supporting characters as a positive attribute; only *Evelina*'s Villars, *Persuasion*'s critical narrator, and Anne Elliot openly voice their concerns regarding melancholy as a positive personality trait. The problem for Burney and Austen is that their novels are still constrained by features of the sentimental novel and the expectation of female propriety. Instead, Burney and Austen both take the dramatization of female mania, already an established feature of the

sentimental novel as a way to resolve the courtship narrative, and use these mental disturbances to reveal the performativity of gender roles and mental impairment in the sentimental novel.

#### **4.2 Temporary Mania in Burney's and Austen's Heroines**

Both Burney's *Camilla* and *Cecilia* use temporary mania to allow for the expression of repressed desires and inner torments, thereby fulfilling the narrative function of uniting the lovers; however, this temporary mania also exposes the conflict experienced by heroines, who cannot act to fulfil their desires even though this demand contradicts any claims to "naturalness." Cecilia and Camilla both practice a studied naturalness, in which their unaffected behaviour is, in fact, strictly regulated and performed. As Kromm explains, Burney uses Cecilia and Camilla's delirium to focus "on the dilemma faced by female characters when their independent actions conflicted with gender conventions and were consequently misprized as signs of mental instability" (361). Their suitors witness this melancholy-induced mania. This mania allows for the resolution of the courtship narrative, but also reveals the danger to female mental health by propriety's requirement of suppressing desires and social action.

Cecilia inhabits a socially precarious position as an unmarried, unconnected heiress navigating London, so she must perform propriety in order to maintain the appearance of a virtuous character. This performance includes feigning disinterest in Delvile. Following her conversation with Mrs. Delvile, Cecilia is temporarily incapable of maintaining the social pretence required: "Cecilia had now acted her part, and acted it to her satisfaction; but the curtain dropt when Mrs. Delvile left the house, nature resumed her rights, and the sorrow of her heart was no longer disguised or repressed" (*Cecilia* 652). This continuous denial of desire causes a temporary mental impairment, which occurs again later in the novel following Delvile's tale of his disagreement with his father and subsequent duel with Monckton. Delvile notices that

Cecilia can only speak in broken sentences (847), or not at all, indicating the extent of her “scattered senses” (847) and the danger to her mental powers. When Delvile wonders if “I have not tortured you quite to madness” (847), he conflates the signifiers of sensibility with mental illness. Kromm states that “many characters in *Cecilia* evince some form of madness or mad-like symptoms caused by being unfairly constrained or by being thwarted from constraining others” (362). Indeed, as soon as Cecilia enters London, her world slowly begins to unravel. Greenfield links this melancholy and madness to personal economy and luxury:

To the extent that Cecilia’s madness is driven by her economic ruin, she appears to fall prey to the ‘English Malady’ that is the price of financial commercial and urban excess and has reached epidemic proportions, infecting Albany, Mr.

Belfield, Mrs. Belfield, Mr. Harrel, Mrs. Delvile, and Mortimer himself. (59)

In Greenfield’s reading of *Cecilia*, madness functions as a narrative prosthesis by allowing for discussion of financial loss in terms of the loss of reason; however, this reasoning discounts how gender and the Culture of Sensibility influence how madness is perceived within the novel.

According to Kromm, “Burney gives special prominence to the role of gender in the social construction of madness, and this is the dominant consideration where Cecilia’s mental status is concerned” (362). Equally important, however, is the role of madness, gender, and sensibility in resolving Cecilia and Delvile’s courtship narrative.

Cecilia’s public madness reveals the slippage between female sensibility and madness. Her unprotected run through the streets coincides with a “high fever” (*Cecilia* 900) and her frenzy results from a physical ailment rather than madness; however, “her rising frenzy” (896) and running throughout the streets of London closely resembles the violent and energetic behaviours associated with madness observed previously with Harrel’s suicide. Cecilia watched

as just prior to his suicide, Harrel “wildly jumping upon his seat,... leapt over the table, and was out of sight in an instant” (413). The occupants of the Three Blue Balls have a similar reaction to Cecilia as they “could give no account of her, but supposed she was broke lose from Bedlam” (897), an assumption based completely on her appearance and behaviour. Cecilia’s claims that she is “not mad” (897) are completely in vain; her audience reads her body’s performance as madness. After all, she has just surprised them all by running into a shop “where, breathless and panting, she sunk upon the floor, and, with a look disconsolate and helpless, sat for some time without speaking” (897) before “wildly starting up” (897). These behaviours of breathlessness, speechlessness, and melancholy are common to Cecilia’s previous performances of sensibility, but are misread here as madness. Following Delvile’s duel with Monckton, Cecilia experiences the speechlessness and hysteria that repeats itself during her flight throughout London:

This energy of distress brought back her scattered senses, scarce more stunned by the shock of all this misery, than by the restraint of her feelings in struggling to conceal it. But these passionate exclamations restoring her sensibility, she burst into tears, which happily relieved her mind from the conflict with which it was labouring, and which, not thus affected, might have ended more fatally. (847)

The London audience, without context, confuses Cecilia’s female sensibility with madness, and reveals the problem of conflicting performative requirements of melancholy, madness, and female sensibility.

Cecilia’s treatment and recovery, supervised by Dr. Lyster, does not involve a discussion of sensibility or melancholy; however, in her brief interactions with Mr. Delvile, Cecilia’s body is able to communicate her mental distress without further endangering her propriety. When Mr. Delvile first sees Cecilia, “she was wholly insensible, but perfectly quiet; she seemed to

distinguish nothing, and neither spoke nor moved” (912). Without having to speak, Cecilia’s mental and physical state are enough to convince Mr. Delvile of the immorality of his actions: “his pride, his pomp, his ancient name, were now sunk in his estimation; and while he considered himself the destroyer of this unhappy creature, he would have sacrificed them all to have called himself her protector” (912). While he only spends moments at her bedside, the “pale image of Cecilia” (913) is powerful enough to prompt his reconciliation with his son: “the view of her distraction had dwelt upon his imagination, the despondency of his son had struck him with fear and horror. He had been haunted by self reproach, and pursued by vain regret; and those concessions he had refused to tenderness and entreaty, he now willingly accorded to change repentance for tranquillity” (928). Cecilia’s temporary mental impairment is singularly responsible for the familial restoration and the successful conclusion to her courtship narrative.

As in *Cecilia*, Camilla’s mania is the inevitable result of the constraining gender roles demanded by the rules of propriety as her forced dissembling and public affectation function as an effort to maintain propriety. Hodgson-Anderson states that *Camilla* “criticizes the artifice of such social acting that encourages a discrepancy between her behaviour and her feelings. And, as in *Cecilia*, Camilla’s near-death is necessary to resolve all misunderstandings and to articulate clearly and finally her own desires” (640-641). Camilla’s forced silence follows Edgar’s rejection. Rather than endanger her status as a proper lady, Camilla has no choice but to comply with Edgar’s wishes and suppress her emotions. Temporary mania allows Camilla to express these forbidden desires while maintaining her propriety. But while Camilla, or her insensible body, may be able to articulate her desires, as Hodgson-Anderson suggests, she still requires an audience that can correctly interpret this performance. As Kromm suggests, “in *Camilla*, the impact of observation and its attendant misrepresentational possibilities is registered by the

heroines, who themselves provide a critical voice for the fallible nature and dangerous potential of scrutiny and diagnosis” (368). While Edgar and Camilla’s mother read her body as emotionally distressed, they remain oblivious to the gender roles that lead directly to Camilla’s mania. Camilla’s mother chastises her for indulging illness to the point of death, but this spectacle is necessary for both communication of desires and for a conclusion to the courtship narrative.

Camilla’s mania-induced vision reveals, for the reader, the link between gender, propriety, and communication of desires. Her delirium, which is self-induced by prolonged starvation and insomnia, manifests itself as a terrifying vision of an inability to control what she writes. A vision of Death compels her to write a confession of her willing self-destruction in the “Records of Eternity” (*Camilla* 875), but Camilla cannot suppress her hand or pen: “A force unseen, yet irresistible, impelled her forward. She saw the immense volumes of Eternity, and her own hand involuntarily grasped a pen of iron, and with a velocity uncontrollable wrote these words” (875). The expressive impulse, in her weakened state, cannot be suppressed and gives way to a torrent of emotional expression. Camilla’s inability to control what she writes is then compounded by her inability to write anything at all: “Again, unlicensed by her will, her hand seized the iron instrument. The book was open that demanded her claims. She wrote with difficulty . . . but saw that her pen made no mark! She looked upon the page, when she thought she had finished, . . . but the paper was blank!” (875-876). The remainder of the vision is punctuated with ellipses and commas, further indicating her loss of language control and communication. This vision reveals Camilla’s frustration at the requirement to control how she communicates because of the stifling norms of her society and social position. Camilla’s delirium is the product of her indulgent sensibility, but it is also the inevitable product of a

society that closely scrutinizes body language. In her efforts to hide her affection for Edgar and her perceived shame, Camilla attempts to control how her body is read; however, this subterfuge inevitably breaks down, aided by her indulgent sensibility, and Camilla loses all control over her body's and mind's performance. Her delirium-induced vision is a criticism of her willing self-destruction, foreshadowing her family's disappointment in her actions, but it is also a meditation on the constraints of gender roles and the similarities between madness and femininity.

Madness, which Ingram notes as effeminizing "for its victim was made passive" (*Cultural Constructions* 147), provides Camilla with an acceptable form of communication; however, she must rely on the witnesses to interpret correctly her bodily communication. Once her suffering is recognized, Camilla is able to articulate her desires. The constraints of gender remain, but temporary mania has allowed Camilla to evade sanction and succeed within the courtship narrative.

Like *Cecilia*, Austen's *Sense and Sensibility* contains various instances of hysteria and madness; however, unlike Burney's sickroom reconciliations, Austen's choice to remove both Marianne's suitors from her sickbed undermines her temporary mania providing a conclusion to the courtship narrative. Austen reveals the danger of fetishizing female melancholy within the Culture of Sensibility with Marianne's temporary mental impairment. By refusing the invalid the power of the sickroom, Austen exposes this artifice. Characters affect sensibility to reaffirm their status to any observer, effectively silencing all criticism; however, Small concedes that the body language of sensibility is essential for communication of thoughts and emotions that cannot be spoken aloud: "It testifies to the inadequacy of language, becoming active at the points where words are too difficult or too crude to express certain desires or motives" (93). In lieu of speech, the body is the most effective means of communication, although Marianne rarely silences



herself long enough for her body to produce any revelation that she has not already spoken aloud. In fact, affectation of a bodily performance of sensibility in *Sense and Sensibility* only serves to highlight the lack of authentic sensibility. When Marianne loses all control over her body and voice during her dangerous fever, it is the first opportunity to view her sensibility without her mediation. Instead, the narrator and Elinor control the presentation of Marianne's body and the significance of her suffering.

Marianne's behaviour and Willoughby's absence from her bedside indicate a further departure from the features of the sentimental sickroom. The silencing of the mad occurs in Austen's *Sense and Sensibility* as Marianne lies in a delirious fever. This shift in how the delirious heroine is rendered on the page reflects a similar lack of autonomy in Burney's *Cecilia*. There are no terrifying spectres surrounding Marianne's bed or chasing her through the street, and no confinement to dark, dank rooms filled with straw. As Small explains, "representations of deranged women in literature of the period typically describe them as pathetically inarticulate but make them in practice very articulate indeed, able and more than willing to give heart-rending testimony to their desertion. Marianne, by contrast, almost loses her voice" (97). The only words recorded from Marianne concern her mother, which Elinor passes off as a delirious statement from a feverish mind. It is left to Elinor and the narrator to editorialize and interpret Marianne's mental and physical condition as perilous to both her mind and body. After a long night,

Marianne's ideas were still, at intervals, fixed incoherently on her mother, and whenever she mentioned her name, it gave a pang to the heart of poor Elinor, who, reproaching herself for having trifled with so many days of illness..., pictured to herself her suffering mother arriving too late to see this darling child,

or to see her rational. (*Sense and Sensibility* 353)

Rather than calling for Willoughby, just as Cecilia and Camilla call for their respective suitors, Marianne calls out for her mother. For all her emulation of the heroines of Sensibility, none of this artifice is present at her sickbed. In place of a distraught Delvile or virtuous Edgar, Austen has a drunken Willoughby to burst in on Elinor rather than Marianne. In a further reversal of expectation, Elinor feels sympathy for Willoughby and is nearly seduced by his arguments (377). By allowing him to have even a little sway over her, Elinor reveals herself to have the same sensibility and romantic notions as her sister, although guarded.

The effect of this transference of role from Marianne to Elinor is a subtle subversion of the genre, further indicating Austen's departure from the conventions of sentimental literature. In Burney's *Camilla*, Mandlebert discovers Camilla and reunites her with her family. In *Cecilia*, Albany first discovers the heroine and reunites her with Delvile. In both cases, the suitor views the heroine's body at its most vulnerable point. Camilla and Cecilia can only exert minimal control over how their mental impairment is presented. And in both cases, the mental impairment is partially caused by the suitor's mistreatment of the heroine. Apologies are made, forgiveness given, and after a period of recovery, marriage. In *Sense and Sensibility*, Colonel Brandon likewise encounters the dying Eliza just in time to reconcile with her; furthermore, this inset tale echoes the sentimentalism found in Burney's novels. For Marianne, however, there is no bedside confession and reconciliation. She is kept apart and hidden from Willoughby. The potency of the sickroom, which aids the courtships of Camilla and Mandlebert, and Cecilia and Delvile, is diffused by Elinor's intervention and leaves Marianne powerless.

The removal of courtship from the sickroom and Marianne's failure to perform completely as a heroine of Sensibility reveal the performative requirements of melancholy. Like

Camilla, Marianne's illness and delirium are self-inflicted by indulging her sensibility for which she, like Camilla, is chastised. Marianne also suffers the same objectification as Cecilia as her delirium renders her silent and she loses all control over how her body's performance is interpreted. Both *Camilla* and *Cecilia* clearly influence the portrayal of Marianne's sickbed, but *Sense and Sensibility* reflects a departure from the fetishization of the suffering body of sensibility. This shift from the spectres and hallucinations in *Camilla* to the silence in *Sense and Sensibility* reflects Austen's suspicions of the Culture of Sensibility. In "Love and Freindship," Austen's heroine cautions followers of sensibility to "run mad as often as you chuse; but do not faint" (133), reflecting Austen's concerns for the dangers of ill health, sickness, and sexual availability associated with sickness and fainting. Madness, unlike fainting, is associated with health and energy, albeit chaotic, rather than latency. Despite the indications that Marianne conforms completely to the ideals of the Culture of Sensibility, Marianne never faints. Her body, for all its innate sensibility, can survive all the initial shocks and disappointments of her failed romance with Willoughby, unlike Burney's heroines. By not fainting, Marianne fails to perform within the expected bounds of the Culture of Sensibility. This failure to faint further indicates the false, performative nature of sensibility. Instead, Marianne's energy focuses on her descent into melancholy and eventual delirium, indicating the serious danger of failed romance on the sensible female body. Marianne's performance of sensibility and refusal to overcome her melancholy result in her illness, which can only be cured by tempered sensibility and re-education through reading.

#### **4.3 The Problematic Case of *The Wanderer's* Elinor**

Reading *The Wanderer's* Elinor alongside her contemporary, *Sense and Sensibility's* Marianne, is problematic. Because *The Wanderer* was written in the 1790s, the text has more in

common with Wollstonecraftian politics, for which Hazlitt condemned the novel, than Austen's novels. Taylor argues that for Wollstonecraft, political and sexual liberation were not mutually exclusive: "Love as an agent of human liberation may seem very distant from the aspirations and passions marking Wollstonecraft's sexual history, but in the turbulent world of 1790s politics the two spheres became closely aligned" (142). Elinor expresses this yearning for both political and sexual liberation in her arguments with Harleigh. As with Cecilia and Camilla, frustrated sexual desires result in Elinor's mental impairment; however, unlike Cecilia and Camilla, whose temporary mental impairment results in securing a successful conclusion to the courtship narrative, Elinor's suitor is unresponsive to her mental torment. Furthermore, Elinor vocalizes her desires, rejecting the propriety exhibited by both Cecilia and Camilla. Burney uses Elinor to explore gender and madness in a manner more closely related to Austen's Marianne than her earlier heroines. The resistance of the Culture of Sensibility is largely absent, unlike in Austen's *Sense and Sensibility*, but both *The Wanderer*'s Elinor and *Sense and Sensibility*'s Marianne reveal the performative aspects and artifice of female melancholy.

For all the Wollstonecraftian overtones, the cause of Elinor's madness and suicide attempts stems from the sentimental trope of sexual loss. Like Camilla, Cecilia and Marianne, Elinor's mental impairment manifests following sexual disappointment in bursts of energy and fractured speech. When Juliet happens upon Elinor on the road, "the impatient Elinor, still looking pale, meagre, and wretched, burst forth, with rapid and trembling energy, into a string of disordered, incoherent, scarcely intelligible interrogatories" (*The Wanderer* 471). Her eloquence on her position as a woman in the world is a shift from the largely silent suffering heroines. Victoria Kortes-Papp states that "woven into scenes that show her unwellness, Burney presents us an Elinor who is deeply and coherently engaged in an intellectual and ideological dialogue

with the world around her” (99). Immediately prior to her first suicide attempt, which itself echoes Wollstonecraft’s attempted suicide following the end of her relationship with Imlay (Godwin 127, 132), Elinor delivers a speech outlining the unjust constraints of propriety, as it forbids her from acting on her desires completely:

“Must even her heart be circumscribed by boundaries as narrow as her sphere of action in life? Must she be taught to subdue all its native emotions? To hide them as sin, and to deny them as shame? Must her affections be bestowed but as the recompence of flattery received; not of merit discriminated? Must every thing that she does be prescribed by rule? Must every thing that she says, be limited to what has been said before? Must nothing that is spontaneous, generous, intuitive, spring from her soul to her lips? – And do you, even you, Harleigh, despise unbidden love!” (*The Wanderer* 177)

This Wollstonecraftian form of speech which questions gendered behaviours separates her from Burney’s other heroines and allows her the unique position of being able to speak for herself rather than relying solely on her body’s physical performance of mental illness; however, in doing so, Elinor rejects propriety as hypocrisy and excludes herself from the courtship narrative. Crump traces Naird’s (Elinor’s physician) and Harleigh’s reactions to Elinor’s speeches and suicide attempts to contemporary theory on madness which “followed Locke in attributing madness to a fault in the imagination rather than reason itself, leading to a false association of ideas upon which the lunatic acted in a rational manner” (329). As Crump points out, the physician “Naird locates the source of Elinor’s disorder in a ‘diseased’ imagination” and endeavours to scare Elinor into maintaining a semblance of sanity or risk confinement (332). Elinor will only be considered cured when she “can be induced to behave like a sane person”

(330). While Harleigh dismisses Elinor's logic and attendant Wollstonecraftian feminism as defective, he is unable to argue against her feminist stance (*The Wanderer* 172-185). His failure to respond to each of Elinor's statements in favour of equality fails to quash her arguments and leaves Elinor's statements unopposed in the text. Harleigh's lack of opposition does not signify that Elinor's arguments have persuaded him. Elinor's madness subverts her statements, allowing Burney to distance herself from Elinor's more revolutionary ideas, but neither Harleigh nor the text counter her arguments. While her suicidal gestures are labelled of "madness," her feminist arguments concerning sentimental heroines disappointed in love, like Juliet, provides an alternate to the sentimental narrative.

Elinor's mental distress culminates in various suicide attempts that, although staged, are designed to end her life; however, Elinor's performances are unsuccessful, as she neither gains Harleigh's love nor the pity of her audience. Hodgson-Anderson states Elinor's "performances never culminate the way she intends, and as a result they do not have the desired effect on either spectators or readers" (646). At Juliet's recital, Elinor arranges her costume in accordance with to the character she plays. Her attire and bearing are sentimental and dramatic: "Elinor appeared in deep mourning; her long hair, wholly unornamented, hanging loosely down her shoulders. Her complexion was wan, her eyes were fierce rather than bright, and her air was wild and menacing" (*The Wanderer* 359). Amongst the assembled concert attendees, Elinor's appearance has the double effect of being starkly different in attire from her audience and to reveal her melancholy through her appearance and behaviour. Likewise, the moment of Elinor's attempted suicide is overtly dramatic: "the blood gushed out in torrents, while, with a smile of triumph, and eyes of idolizing love, she dropt into his arms, and clinging round him, feebly articulated 'Here let me end! – accept the oblation – the just tribute – of these dear, delicious, last

moments” (359). The nearby men fail to provide the proper sentimental reaction to Elinor’s suicide and taking their cue from the staged performance, “[approach] rather as spectators of some public exhibition, than as actors in a scene of humanity” (360). Elinor is a curiosity rather than a legitimate sufferer of disappointed love. Hodgson-Anderson points out that “because the audience perceives her suffering as indisputably staged, Elinor’s performance cannot be understood for what it is: ‘a scene of humanity.’ Burney’s statement with its theatrical terminology acknowledges that real human suffering can be staged – but also announces the audience’s inability to credit this” (647). Ultimately, Elinor’s protests are undermined by her reliance on artifice to convey the authenticity of her desires; Harleigh remains unmoved, and Elinor’s temporary mental impairment and suicide attempts fail to provide her with a successful conclusion to the courtship narrative.

By the standards of the sentimental novel, Elinor’s ending is unsatisfactory; but by Burney not reintegrating Elinor into the narrative through marriage, Elinor’s position provides resistance to the dominant courtship narrative. Having married off and settled her heroine, Burney makes no provision for Elinor. Bilger argues that

Elinor, as a rich, unmarried woman, can cast her reputation to the winds and claim a degree of independence that would have been unknown to most women. She can finance her eccentricities and stand at a distance from the ridicule of the world. Initially a caricatured feminist who mouths revolutionary statements to shock her audience, Elinor emerges as a modern-day Cassandra whose message, though taken for madness, cannot be refuted. (337)

Similarly, Backschieider suggests that characters like Elinor lack a satisfactory literary conclusion as part of a strategy by female writers to “resist appropriation into patriarchal plots and

categories” (146). These female authors

begin to create and establish ways of exploring and elucidating themes and subjects of vital importance to themselves within commercially viable forms. As a student in my seminar said, they have created the ‘inexpressible role,’ a life moving through time that is not defined by the moment of its marriage or sexual fall or by its relationship to a man. (146)

Backscheider refers specifically to Aphra Behn and Eliza Haywood in her analysis, but Burney’s Elinor also fits into this group of unconventional heroines. Elinor remains in this inexpressible role, unmarried and with enough private income to be self-sufficient. And although “her excentricities” (*The Wanderer* 873) are tempered, Burney does not have Elinor reject her belief in female equality. As Wallace states, “while *The Wanderer* rather crudely parodies Wollstonecraft’s revolutionary fervour in the character of Elinor Joddrell, it also thematizes and advances, in subterranean ways, the specific feminist agenda proposed in Wollstonecraft’s posthumous novel [*Maria*]” (488). At the end of the novel, she remains an unchallenged and unrepentant foil to Juliet, an eccentric and marginalized presence that subverts the heroine’s sentimental narrative.

#### **4.4 Conclusion**

Temporary mental impairment afflicts the heroines of Burney’s and Austen’s novels disproportionately to the male characters; however, this impairment is necessary for allowing temporary evasion of propriety, which in turn leads to successful courtship narratives. Women were believed to suffer from melancholy, hysteria, and nervous delicacy more frequently because of their innately weaker nerves. Mental impairment, when combined with gender performance and courtship narratives, results in heroines in Burney’s and Austen’s novels experiencing



melancholy or temporary madness. The heroine's ease of movement between reason and madness reflects eighteenth-century concerns about female nervous delicacy. In both Burney's and Austen's novels, melancholy is a social construction that borrows from bodily performances associated with the Culture of Sensibility. By performing melancholy or by correctly recognizing someone afflicted with melancholia, a character such as Evelina or Anne can gain status within the Culture of Sensibility. Just as temporary physical impairment provides suitors with courtship opportunities, temporary mental impairment allows for a successful conclusion of these narratives. In the case of *The Wanderer*'s Elinor, mental impairment provides Burney with distance from the Wollstonecraftian arguments found in Elinor's dialogues with Harleigh. As such, Burney's Elinor provides a glimpse of a female character in what Backscheider terms the "inexpressible role" (146). With the exception of Elinor, mental impairment provides an opportunity to resolve courtship narratives and to prove membership within the Culture of Sensibility.

## CONCLUSION

My dissertation began with a question: given the similarities in the portrayal of disability in both Burney's and Austen's novels, what precisely was Burney's influence on Austen's text and how did Austen's texts engage and reflect Burney's use of disability? An examination of the characterization and use of disability in Burney's and Austen's novels reveals Austen's reworking and modifications of Burney's use of disability. Both authors use disability to make Sensibility visible on the body; however, Austen treats this performative aspect of Sensibility with scepticism. Differences in Burney's and Austen's treatment of disability appear in examining the performative aspect that Austen took from Burney's novels and show how Austen adjusted the representation of disability to coincide with her criticism of Sensibility. The social construction of disability features heavily in both authors' works, but in Austen's novels criticism of the Culture of Sensibility complicates the social construction of disability. The framing of Eugenia's disability from within her family and by her surrounding society reveals the difficulty in a simplistic, binary view of disability. Austen develops this problem of locating disability further through ridiculing the affectation of disability, most notably in *Persuasion* where the social construction of disability is compounded with the personal motives of Louisa Musgrove. The reliance of the Culture of Sensibility on temporary illness to resolve courtship narratives features in both Burney's and Austen's novels. Austen adopts this requirement of sentimental fiction and with a clear reference to the performative nature of Camilla's illness, has Marianne suffer in a similar fashion. But where Camilla's self-indulgence in performing Sensibility is lightly reproofed by Camilla's mother and Burney's narrator, Marianne's near-death experience is, in contrast, a round condemnation of the performative requirements of Sensibility. Mental illness as it relates to the Culture of Sensibility requires a bodily performance in order to

be visible and recognized by the audience. In addition to physical illness, temporary mental impairment assists in the resolution of courtship narratives. But while Burney's heroines experience temporary mental impairment as a symptom of their own frustrated desires and expression, Austen's heroines perform a more subdued, quiet depression that rejects the flamboyant visions of Camilla and Cecilia in favour of the appearance of authenticity. The differences in the use of disability between Burney's and Austen's works emanate from Austen's concerns of the affectation of disability and the Culture of Sensibility. Throughout all these examples, it is evident that both Burney's and Austen's texts accept that disability is a social construction inextricably connected to the bodily representation of Sensibility.

The anomalous bodies in both Burney's and Austen's novels reveal the performance of disability which makes Sensibility visible. These performances of disability are not immediately or permanently stigmatizing when associated with the Culture of Sensibility. Temporary and permanent disability can affect courtship narratives positively by providing bodily proof of Sensibility as well as courting opportunities. Without analyzing Fanny's general debility in *Mansfield Park*, her weakness functions as an extension of her meek character. Her headaches represent her emotional distress and elicit pity from Edmund, but Fanny's disability also provides Crawford an opportunity to court her. Furthermore, as a poor and dependent relation, Fanny's status within *Mansfield Park* is beneath that of her cousins. Her performance of disability, such as her headache following Edmund's inattention, complies with the requirements of the Culture of Sensibility and provides Fanny with the opportunity to claim a higher status within her immediate society. Recognizing the influence of disability in *Mansfield Park* results in the association of Fanny's performance of weakness with Sensibility. Recognizing that the performative requirements of Sensibility demand the visible presence of disability further

illuminates Fanny's character and motivations beyond that of the poor and weak relation.

The social construction of the anomalous body in Burney's and Austen's novels has been of particular interest. Wiltshire's work on both Burney and Austen reflects this heightened interest in the disabled body. Absent from much of the discussion of colds and nervous conditions is the connection of these temporary and permanent disabilities to the Culture of Sensibility and sentimental literature, which fundamentally changed the social construction of disability. Both Burney's and Austen's texts contain characters who attempt to control the significance of their anomalous bodies. *Camilla's* Eugenia only suffers from shame and ridicule once she leaves the protective society of her family, throwing into conflict two competing social constructions of the significance of Eugenia's deformities. When Eugenia decides to take control of what her disability signifies by writing a book, which will include her portrait, she intends to navigate between the studied silence surrounding her deformity adopted by her family and the cruel mockery and ridicule displayed by the public. By writing her book, Eugenia denies both constructions of her disability and focuses instead on what her disabilities signify to her. Austen's *Persuasion* follows upon Eugenia's attempt to control the social construction of her anomalous body with Mrs. Smith's studied performance of the sentimental illness narrative. While the narrator is aware of Mrs. Smith's manipulations, the effect of her appropriation of the illness narrative is the exposure of the artifice behind her sentimental narrative. Mrs. Smith's performance of disability and adherence to the illness narrative reflect her internalization of this narrative's expectations of how disability appears on the body and in speech. The Culture of Sensibility dictates the social construction of disability as part of a sentimental narrative as with *Camilla's* Eugenia; however, Austen's novels show resistance to purely sentimental readings of characters performing disability. Understanding the influence of disability on sentimental illness

narratives allows for a discussion of how the anomalous body interacts with social construction.

The influence of disability also features in the temporary invalidism found in both Burney's and Austen's courtship narratives. Serious illness and affliction do not disqualify a heroine from marriage and are requirements for a heroine's moral correction. Wiltshire allows that characters appropriate the medical discourse for "social advantage" ("Medicine, illness and disease" 313) outside of courtship, but it is clear from my analysis that temporary illness and disability provide additional courtship opportunities within the sickroom and allow a character to prove propriety through a bodily performance of temporary disability. Seeber argues that *Sense and Sensibility*'s Marianne requires a "violent education" (225) of moral correction that can only be delivered by severe illness. Absent from this discussion is how temporary disability is necessary for courtship narratives, especially in Burney's and Austen's novels. As Hemlow points out, Burney's Camilla and Cecilia both begin their narratives as nearly flawless heroines, and yet both undergo severe moral correction through their respective illnesses, but Hemlow's analysis fails to account for the necessity of temporary disability in courtship as a proof of Sensibility (756). In Burney's novels, temporary disability does more than rid Camilla and Cecilia of any lingering affectations or misapprehensions; burning and incoherent with fever, these heroines' sickbeds provide opportunity for their sensibility to be displayed and the resolution of the courtship narrative. Their respective suitors, Mandlebert and Delvile, recognize the errors in their own judgment by simply gazing upon the suffering and sensible bodies of the heroines. Temporary disability proves their propriety and Sensibility. In *Sense and Sensibility*, Austen adjusts the narrative to replace Willoughby with Colonel Brandon. While Colonel Brandon is also refused entry to Marianne's sickroom, he provides comfort and aid to Elinor, and witnesses Marianne's recovery. Marianne's temporary disability results from her affectation of

Sensibility, for which she is criticized by the narrator and Elinor, and once cured she is ready for marriage. In both Burney's and Austen's courtship narratives, temporary disability is essential to the resolution because the heroine's bodily performance of disability provides the physical proof of her propriety.

Although a brief episode in *Pride and Prejudice*, Jane Bennet's cold encapsulates the influence of disability on the courtship and illness narratives in Austen's novels, as well as the differences between Burney's and Austen's use of these narratives. There are no delirious fevers, physicians, or madhouses for Jane. Austen gives her a cold, common but with the potential to be worse, and leaves her in a sickroom at Netherfield in the care of Elizabeth and an apothecary. Although he is in the house, Bingley never approaches Jane's sickroom. Elizabeth's function as an intermediary eliminates any bedside declarations of love. Next to Jane, Elizabeth's near perfect health is starkly obvious. The positioning of Elizabeth is as a foil to the more delicate Jane, who more closely resembles the established character of the sentimental heroine, such as Burney's Camilla and Austen's Marianne, challenges the expected narrative. In giving Jane only a cold and isolating her, and in having the more robust Elizabeth to care for her, Austen subverts the established narrative twice. Furthermore, Mrs. Bennet's machinations to ensure Jane's cold and inevitable stay at Netherfield indicate her awareness of the performative power of the invalid in courtship. By endangering Jane's health and forcing her temporary stay at Netherfield, Mrs. Bennet hopes to heighten Bingley's romantic interest in her. The performative requirement of illness in courtship is blatant and unavoidable; furthermore, the influence of disability in Burney's and Austen's texts indicates that these illnesses are more than mere narrative elements because they refer to the importance of the bodily performance of disability to displaying Sensibility in courtship.

The Culture of Sensibility influences Burney's and Austen's descriptions of male invalidism as each author explores the connection between the performative necessity of Sensibility and the social construction of male disability. In both Burney's and Austen's novels, male characters who perform disability occupy a space outside the courtship narrative. Their presence reveals the gender difference in the social construction of invalidism. Male disability consists of hypochondria and gout primarily and provides an opportunity to prove their membership in the Culture of Sensibility through their appropriation of the illness narrative. The plethora of male invalids gains distinction by appealing to the Culture of Sensibility with their performances of illness. *The Wanderer's* Sir Jaspar appropriates the social construction of nervous Sensibility when describing his gout, but his behaviour undermines his affectation and reveals his malevolent nature. Without recognizing the importance of disability to the Culture of Sensibility, Sir Jaspar's behaviour appears eccentric. The power of disability within the Culture of Sensibility explains Sir Jaspar's refusal to accept the social construction of his gout. In contrast to Burney's gouty men, Austen's male invalids perform hypochondria primarily, which is more connected to the Culture of Sensibility than gout. Mr. Woodhouse's and Arthur Parker's respective adherence to their illness narratives reveals an underlying suspicion of the appropriation of medical discourse to justify control, in the case of Mr. Woodhouse, or malingering, in case of Arthur Parker. The depiction of male invalidism reflects Austen's concern over the appropriation of disability by a public that was becoming more medically literate. Exploring the social construction of disability found in Burney's and Austen's descriptions of male gout and hypochondria reveals both authors' dependence on disability to provide bodily proof of Sensibility.

Burney's and Austen's novels rely on disability to explore the performative requirements

of temporary mental impairment. Temporary mental impairment allows the heroine's propriety to remain uncompromised while simultaneously communicating sexual desire or frustration to her suitor. The bodies of these feverish heroines who suffer temporary mental impairment communicate their desires for familial and romantic reconciliation through somatised mental distress. This mental distress, similar to temporary physical impairment, involves a degree of performance of disability; however, this performative aspect must be unobtrusive or a heroine risks exposure as affected and ineligible for marriage. Camilla's and Cecilia's speechless bodies still communicate their frustrated desires, thereby revealing the dangers in the stifling demands of female propriety. As McMaster states, "Cecilia and Camilla actually go mad at the climaxes of their complicated love stories. It is not the love itself, however, that causes their condition, but the obligation they are under, as women, to be silent about it" ("The Silent Angel" 239). The heroines' bodies do not remain silent as their mental conflict is visible through a bodily performance. Both courtship narratives are resolved because their lovers interpret this distress as an expression of fidelity and love. Conversely *Sense and Sensibility*'s Marianne has no suitor to interpret her somatic performance as a sign of unutterable desire. Because Marianne's body is silenced completely by the text, Elinor and the narrator provide a reading of Marianne's body that condemns her self-indulgent affectation of Sensibility. The effect of this denial is a further subversion of the illness narrative through exposing the requirement of disability for the production of Sensibility. The performance of disability is essential for the successful resolution of these courtship narratives.

Disability studies in eighteenth-century literature provide a new method for examining both canonical and non-canonical eighteenth-century texts through analyzing the narrated body and its environment. But asking what disability signifies within the eighteenth-century novel



reveals no easy answers as each author engages with the body differently. Austen's use of disability in novels reflects the Regency understanding of bodily difference, but the various characters with disabilities in her novel also refer back to Burney's earlier influence. For example, Burney's Evelina believes she can read Macartney's body for signs of Sensibility based on his bodily performance of disability, but her social construction of disability is based upon her own affectations to the Culture of Sensibility. Similarly, Austen's Anne Elliot reads Benwick's behaviour as representative of the Culture of Sensibility based upon her personal experience of depression and her bodily performance; however, both the narrator and Anne are aware of the inherent performativity and possible affectation of disability in order to prove Sensibility. For both Burney and Austen, the issue is not that disability is necessary for the production of Sensibility, but that affectation of disability subverts the entire concept of Sensibility.

Over the past two decades the field of disability studies in the eighteenth-century literature has grown exponentially. Disability studies began as a site of resistance to the medical definitions in the 1970s, and following the "rejection of the medical model as the foundation for any effective understanding of impairment or disability" eventually became a new approach to literature (Williams 124). Mitchell and Snyder's *Narrative Prosthesis* and Davis's *Bending Over Backwards* both argue the need to examine the use of disability and bodily difference in literature. Alongside these calls for a new assessment of the narrative use of disability, eighteenth-century literary scholars are examining disability in the novel, on the stage, in pamphlets, and in medical literature. Helen Deutsch's work on Pope and Johnson focuses on the interplay between the artist's public persona and texts. Felicity Nussbaum's work explores the connection between race, gender, and disability in the eighteenth-century. Kathleen James-Cavan's study of William Hay's *Deformity: An Essay* explores Hay's self-representation of his

disability through his writing. This dissertation furthers disability studies as a literary theory through connecting the characterizations of the anomalous body in Burney's and Austen's texts to the Culture of Sensibility and the social construction of disability. Their contemporary popularity and the varieties of disability presented in their novels – including fainting, headaches, gout, and smallpox – make the works of Burney and Austen a readily accessible source to investigate the construction of disability in late eighteenth-century literature.

Closely connected to the history of disability in the eighteenth century is work on the history of medicine and health. This field has several well-established authorities that have examined eighteenth-century medicine and health from historical, sociological, and medical perspectives. Porter's, Rousseau's, and Ingram's individual contributions appear to be exhaustive; however, the advent of disability studies offers an opportunity to re-evaluate eighteenth-century medical treatises. Even a cursory study of popular medical pamphlets and texts, such as Cheyne's *The English Malady* and Buchan's *Domestic Medicine*, reveals the spectrum of illness and disabilities that could, at any moment, afflict an individual. Robust health was the exception rather than the rule, as it was statistically probable that an individual would experience either temporary or permanent disability at some point in his or her life (Porter, *In Sickness* 26). Beyond the dangers of communicable diseases is the spectre of nervous disorder. The impact of the Culture of Sensibility on the perception of nervous disorders has been well documented by Porter, Rousseau, and Ingram, but what of the connection to the social construction of disability? Foucault posits the connection between Sensibility and the performative physicality of melancholia and nervous disorders (*Madness* 155-156); the bodily performance of disability relies on a clear social construction of how Sensibility appears on the body. The cohesive sentimental body that appears in Burney's and Austen's texts relies on a

social construction of disability.

This dissertation focused on Burney and Austen because of Burney's significant influence on Austen's portrayal of disability and sensibility; however, the majority of eighteenth-century and Regency literature remains unexamined from this perspective. Because of the connection between performance, disability, and Sensibility, analyzing Sterne's *Tristram Shandy* would further the exploration of disability in eighteenth-century sentimental literature. As Burney's sphere of influence includes more female authors than Austen, the novels of late-eighteenth century women writers, such as Mary Hays, Maria Edgeworth, and Elizabeth Inchbald, could bear an examination for a similar reliance of disability in the production of Sensibility and courtship narratives. Gothic novels, such as Ann Radcliffe's *The Italian* and *Mysteries of Udolpho* which both feature in Austen's *Northanger Abbey* with its reliance on the language of Sensibility, provide an excellent opportunity to explore connections between disability and Sensibility, as well as race and gender. An exploration of bodily performance, disability, and Sensibility should also involve the plays of Burney, Elizabeth Inchbald, and Hannah Cowley. This dissertation provides a basis with which to further explore the connections between disability, Sensibility and performance in the late-eighteenth century texts.

The presence of disability in Burney's and Austen's novels provides a connection between the Culture of Sensibility, performance, and social construction. Courtship and illness narratives both feature the social construction of disability in order to provide narrative resolution. Characters performing disability allow Burney and Austen to engage with the cultural anxieties surrounding affectation and the Culture of Sensibility. Prior to the development of disability studies, these anomalous bodies remained at the margins of the text as curiosities; however, the anomalous body is central to the late eighteenth-century novel because

of the Culture of Sensibility's performative requirements. It is only through examining the influence of disability in Burney's and Austen's novels that these anomalous bodies become normalized by the Culture of Sensibility.

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